DOCUMENT RESUME

ED 324 599 CG 022 855

AUTHOR	Scheer, Judith K.
TITLE	Into Adolescence: Living Without Tobacco. A Curriculum for Grades 5-8. Contemporary Health Series.
SPONS AGENCY	Robert Wood Johnson Foundation, New Brunswick, N.J.
REPORT NO	ISBN-1-56071-027-6
PUB DATE	90
NOTE	94p.; For other titles in this series, see CG 022 854-858.
AVAILABLE FROM	Network Publications, 1700 Mission St., Suite 203, P.O. Box 1830, Santa Cruz, CA 95061-1830 ($19.95, quantity discounts).
PUB TYPE	Guides - Classroom Use - Guides (For Teachers) (052)
EDRS PRICE	MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS	*Adolescents; Health Education; Intermediate Grades; Junior High Schools; *Preadolescents; *Prevention; *Smoking; *Tobacco

ABSTRACT

The "Contemporary Health Series" covers critical health and family life topics in a sequence of modules with two curricular divisions: "Into Adolescence" for middle school teachers and "Entering Adulthood" for high school teachers. This module presents a tobacco "no use" message to students in grades five through eight through a series of eight lessons. To enable students to better understand the effects of tobacco use on the body, the first lesson explains the structure of the respiratory system and its functions. Lesson 2 teaches that all forms of tobacco, including smokeless tobacco, are harmful. Lesson 3 explores the physical effects of tobacco use. Lesson 4 continues the examination of the dangers of tobacco use, including the effects of sidestream and secondhand smoke. Lesson 5 allows students to consider the various factors that influence their decisions and ways to counteract negative influences; lesson 6 deals with peer pressure and offers students the opportunity to practice refusal skills. Lesson 7 continues the study of influences on decisions about tobacco use with an examination of advertising techniques. The final lesson helps students look at reasons for the choices people make about tobacco use and encourages students to make a public statement about tobacco use and to support the goal of a tobacco-free society. (NB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

INTO ADOLESCENCE

Living Without Tobacco

Judith K. Scheer, EdS, CHES

ED 360 228 55

PERMISSION TO REPRODUCE THIS MATERIAL IN MICROFICHE ONLY HAS BEEN GRANTED BY

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

U.S. DEPARTMENT OF EDUCATION

2

CONTEMPORARY HEALTH SERIES

Kathleen Middleton, MS, Series Editor

INTO ADOLESCENCE:

Living Without Tobacco

INTO ADOLESCENCE:

Living Without Tobacco

A Curriculum for Grades 5-8

Judith K. Scheer, EdS, CHES

Contemporary Health Series
Kathleen Middleton, MS, Series Editor

Network Publications, a division of ETR Associates
Santa Cruz, CA • 1990

Network Publications' Contemporary Health Series

Into Adolescence (for grades 5-8)

- Choosing Abstinence
- Enhancing Self-Esteem
- Learning About AIDS
- Learning About Reproduction and Birth
- Living in a Family
- A Time of Change (puberty)
- Avoiding Drugs
- Communicating Emotions
- Becoming a Health-Wise Consumer
- Making and Keeping Friends
- Living Without Tobacco

Entering Adulthood (for grades 9-12)

- Connecting Health, Communication and Self-Esteem
- Coping with Sexual Pressures
- Living in Relationships
- Preventing Sexually Related Disease
- Understanding Reproduction, Birth and Contraception
- Balancing Stress for Success
- Understanding Depression and Suicide
- Examining Drugs and Risks
- Developing Responsibility and Self-Discipline
- Planning Life Directions

© 1990 by Network Publications, a division of ETR Associates.
All rights reserved. Published by Network Publications,
P.O. Box 1830, Santa Cruz, CA 95061-1830.

Printed in the United States of America

10 9 8 7 6 5 4 3 2 1

Cover design: Julia Chiapella

Illustrations: Ann Smiley

Title No. 381

Library of Congress Cataloging-in-Publication Data

Scheer, Judith K.
Into adolescence: living without tobacco

(Contemporary health series)
Bibliography: p.
1. Tobacco education (Elementary)—United States. 2. Health education (Elementary)—United States. I. Title II. Series.

LB.1587.S37 90-35911
ISBN 1-56071-027-6 CIP

This curriculum was made possible, in part, by a grant from the Walter S. Johnson Foundation. The opinions expressed in this curriculum are those of the author and do not necessarily reflect the opinions of the Walter S. Johnson Foundation.

CONTENTS

Editor's Preface vii

Introduction 1
- Setting Classroom Atmosphere 2
- Overview 2
- Objectives 3
- Time 3
- Instructional Strategies 4
- Evaluative Methods 6

Lessons
1. The Amazing Respiratory System 7
2. Tobacco—No Type Is Safe 23
3. Hazardous to Your Health 39
4. Blowing Smoke 55
5. Making Decisions 69
6. Saying No 75
7. Advertising Pressures 85
8. Living with Your Choice 97

Appendix
- References 111

EDITOR'S PREFACE
Contemporary Health Series

Health educators and practitioners know that prevention of health problems is far more desirable than treatment. The earlier the knowledge and skill to make healthful decisions are instilled, the greater the chance a healthful lifestyle will be adopted. School is the logical place in our society to provide children, adolescents and young adults the learning opportunities essential to developing the knowledge and skills to choose a healthful life course.

The **Contemporary Health Series** has been designed to provide educators with the curricular tools necessary to challenge students to take personal responsibility for their health. The long-range goals for the **Contemporary Health Series** are as follows:

Cognitive. Students will recognize the function of the existing body of knowledge pertaining to health and family life education.
Affective. Students will experience personal growth in the development of a positive self-concept and the ability to interact with others.
Practice. Students will gain skill in acting on personal decisions about health-related life choices.

Within the **Contemporary Health Series** there are two curricular divisions: Into Adolescence for middle school teachers and Entering Adulthood for high school teachers. The Into Adolescence modules focus on several different health and family life topics. Modules addressing puberty, AIDS, the family, self-esteem, reproduction and birth, sexual abstinence, and drug, alcohol and tobacco education have been developed by skilled author/educators.

Entering Adulthood includes reproduction, birth and contraception, health behavior, communication and self-esteem, AIDS and other STDs, relationships, sexual abstinence, and drug, alcohol and tobacco education.

All the authors are, or have been, classroom teachers with particular expertise in each of the topic areas. They bring a unique combination of theory, content and practice resulting in curricula which weave educational learning theory into lessons appropriate for the developmental age of the student. The module format was chosen to facilitate flexibility as the modules are compatible with each other but may stand alone. Finally, ease of use by the classroom teacher has driven the design. The lessons are comprehensive, key components are clearly identified and masters for all student and teacher materials are provided.

The **Contemporary Health Series** is intended to help teachers address critical health issues in their classrooms. The beneficiaries are their students, our children, and the next generation.

Kathleen Middleton, MS, CHES
Series Editor

INTRODUCTION

Nicotine, the addicting agent in cigarettes, is one of the most addictive drugs in use today. Cigarette smoking kills more people prematurely than heroin, cocaine and other illicit drugs—plus automobile accidents, homicide, suicide and alcohol abuse—*combined*. In our concern over drug abuse, we must remember that tobacco takes by far the greatest toll on our population.

According to the American Lung Association, millions of smokers still don't realize that smoking is hazardous to their health. More than half of all Americans do not realize that cigarette smoking is addictive (American Lung Association, 1987). In addition, recent immigrants to this country often bring with them harmful tobacco practices without benefit of knowledge about tobacco's health risks.

Beginning the use of tobacco is primarily an adolescent phenomenon. Studies show that school-based tobacco education programs can significantly reduce adolescent smoking behaviors (Glynn, 1989). The goal of educators is to convince students not to begin tobacco use or to quit before it becomes too difficult to break the addiction.

Teachers must approach tobacco education with sensitivity to students' backgrounds, experiences and vulnerability to group expectations and pressures. The fact that tobacco use is a health hazard is well-documented in research. This can tempt teachers to take a "let me tell you what is right" approach, without taking into account the tremendous number of pro-tobacco messages bombarding students from home, friends and media. Teachers can offer a clear "no-

use" message while still being sensitive to the "pro-use" pressures that exist in society.

Recognize your students' maturity levels and their knowledge and experience bases. Make every effort to understand family and cultural influences, as well as the kind of peer pressure that pushes students to take risks. The factors involved in adopting and continuing tobacco use are complex.

Offering only facts will not change behaviors. You are encouraged to supplement this module with ample amounts of emphasis on self-esteem and refusal skills.

Editor Note: The **Contemporary Health Series** includes a module on self-esteem for grades 5-8, entitled *Into Adolescence: Enhancing Self-Esteem.* Network Publications also offers an entire refusal skills and decision-making program entitled *It's Your Choice*—which includes *Saying No to Tobacco*, a curriculum guide, and two student books—*Tobacco: The Real Story*, and *Danny's Dilemma*, an interactive story.

Setting Classroom Atmosphere

The classroom atmosphere is critical to the success of tobacco education programs. Students must be able to share what they know, or what they think they know, and teachers should attempt to answer all questions that arise. If teachers don't know an answer, they should say so and tell students they will try to find out.

Each student's opinion should be valued, even if it is different from other students'. Class discussions need to be structured so that everyone feels equal and as comfortable as possible. Teachers should clarify guidelines for sharing information. These guidelines should include allowing students the right to "pass" when they have been asked a question they don't want to answer.

Overview

To enable students to better understand the effects of tobacco use on the body, the module begins with a lesson on the respiratory system. Students study the structure of the respiratory system and its functions.

In Lesson 2, students learn that all forms of tobacco, including smokeless tobacco, are harmful. The next lesson explores the physical effects of tobacco use.

Lesson 4 continues the examination of the dangers of tobacco use, including the effects of sidestream and secondhand smoke. In this lesson, students also consider ways to communicate their feelings about tobacco use.

In Lesson 5, students consider the various factors that influence their decisions and ways to counteract negative influences. The next lesson deals with peer pressure and offers students the opportunity to practice refusal skills.

Lesson 7 continues the study of influences on decisions about tobacco use with an examination of advertising techniques. Students are encouraged to analyze and evaluate advertising messages.

In the last lesson, students look at reasons for the choices people make about tobacco use. Students are encouraged to make a public statement about tobacco use and to support the goal of a tobacco-free society.

Objectives

Lesson 1	*The Amazing Respiratory System*	■ Students will be able to describe the structure and function of the respiratory system.
Lesson 2	*Tobacco—No Type Is Safe*	■ Students will be able to explain why tobacco—in all its common forms (cigarette, cigar, pipe, snuff, chew)—is harmful.
Lesson 3	*Hazardous to Your Health*	■ Students will be able to describe the physical effects of nicotine and tar.
Lesson 4	*Blowing Smoke*	■ Students will be able to describe the effects of tobacco use on others. ■ Students will be able to demonstrate ways to communicate their feelings about tobacco use.
Lesson 5	*Making Decisions*	■ Students will be able to identify factors that influence decisions about tobacco use.
Lesson 6	*Saying No*	■ Students will be able to describe strategies for saying no to tobacco.
Lesson 7	*Advertising Pressures*	■ Students will be able to analyze advertising strategies used by the tobacco industry. ■ Students will be able to evaluate advertising messages.
Lesson 8	*Living with Your Choice*	■ Students will be able to evaluate reasons for use or nonuse of tobacco.

Time

The time indicated for each lesson is an approximate measure, based on a 45-50 minute class period. The actual time required to complete all activities in a given lesson will vary, depending

on student interest and ability. Lessons that will probably require more than one class period to complete are indicated.

Instructional Strategies

This module incorporates a variety of instructional strategies designed to develop and maintain student interest and motivation. Some strategies are traditional, while others are more interactive, encouraging students to help each other learn. The specific strategies used in each lesson are clearly identified. An alphabetical list of instructional strategies and their descriptions follows:

- Brainstorming
- Class Discussion
- Continuum Voting
- Cooperative Learning Groups
- Oral Presentations
- Overhead Transparencies
- Roleplays
- Teacher Lecture
- Worksheets

Brainstorming

Brainstorming is used to stimulate discussion of an issue or topic. Students are asked to give their ideas and opinions without comment or judgment from the teacher or other students. Ideas can be listed on the chalkboard, on butcher paper or newsprint or on a transparency. Brainstorming should continue until all ideas have been exhausted or a predetermined time limit has been reached.

Class Discussion

A class discussion led by the teacher is one of the most valuable strategies used in education. It can be used to initiate, amplify or summarize a lesson. Most of the lessons in this module include some form of class discussion.

Continuum Voting

Continuum voting is a stimulating discussion technique. Students express the extent to which they agree or disagree with a statement read by the teacher. To prepare the classroom for this activity, post an ***Agree*** sign on one wall and a ***Disagree*** sign on the opposite wall. There should be room for students to move freely between the two signs.

When continuum voting begins, ask students to stand between the two signs. Tell them to view the distance between the two signs as a continuum. Explain that you will be reading statements and asking students to *mentally*, *physically* and *verbally* react to them.

After hearing a statement, students should decide how they think or feel about it. They should then move to the point between the signs of the continuum that reflects their thoughts or feelings. The closer to the ***Agree*** sign they stand, the stronger their agreement. The closer to the ***Disagree*** sign they stand, the stronger their disagreement. A position in the center between the two signs indicates a neutral stance.

When all students have chosen a position, conduct a discussion about the thoughts and feelings that explain their positions. The discussion should be voluntary. Students should be allowed to pass if they prefer not to explain their positions. Continuum voting provides for active involvement of all students and often stimulates high-energy discussions.

Cooperative Learning Groups

Cooperative learning is one of the most productive teaching strategies currently available to teachers. Students work in small groups to disseminate and share information, analyze ideas or solve problems.

The size of the groups depends on the nature of the lesson and the make-up of the class. Groups usually work best with two to six members.

Group structure will affect the success of the lessons. Groups can be formed by student choice, random selection or a more formal, teacher-influenced process.

Groups seem to function best when they represent the variety and balance found in the classroom. Groups also work better when each student has a responsibility within the group (reader, recorder, timer, reporter, etc.).

While groups are working on their tasks, the teacher should move from group to group to answer questions and deal with any problems that arise. At the conclusion of the group process, some closure should take place.

Oral Presentations

Students sometimes present information orally to the rest of the class. Such presentations may be done by individual students or by groups. Students enjoy learning and hearing from each other, and the experience stimulates positive interaction.

Overhead Transparencies

Overhead transparencies are an effective way to present information and examples visually. Most of the lessons in this module provide teacher resources that can be used as transparencies.

Teacher Lecture

The traditional teacher lecture disseminates information directly from the teacher to students. In some lessons, this approach is the best way to provide information. Generally, this method is combined with other methods to assure high-level motivation and learning.

Worksheets

Most lessons in this module include worksheets. Students may be asked to complete the worksheets individually or in cooperative learning groups. Some worksheets include an activity

to be completed outside of class. Completed worksheets should generally be reviewed with the whole class to provide relevant and timely feedback.

Evaluative Methods

Each lesson provides the teacher with one or more methods for evaluating student performance on stated objectives. The methods are listed following the procedure section of each lesson. Evaluative methods include analysis and comment on worksheets and other written materials, as well as observation of individual responses.

It is impossible to objectively, quantitatively or qualitatively measure the development and maintenance of personal awareness and the ability to make personal health choices. Furthermore, it is inappropriate to grade student work based on personal feelings, beliefs or behaviors. Therefore, the evaluation methods serve as tools to assess students' participation and cognitive learning in each lesson.

LESSON 1

THE AMAZING RESPIRATORY SYSTEM

Objective

Students will be able to describe the structure and function of the respiratory system.

Time

One class period.

Overview

To understand the effects of tobacco use on the body, students must have an understanding of the body's respiratory system. When students understand and appreciate the work of the respiratory system, they can better realize tobacco's negative effects on the body.

In this lesson, students use a worksheet to discuss and take notes on the respiratory system. The teacher uses a model to demonstrate the function of the capillaries.

Instructional Strategies

Brainstorming, class discussion, teacher lecture, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector
- ✓ Transparency marker.

OBTAIN:

- ✓ Slinky (or approximately 1 foot of dryer hose).
- ✓ Tube sock.
- ✓ Bunch of (plastic) grapes.
- ✓ Balloon.
- ✓ Materials for ***Capillaries Model***.

COPY:

- ✓ **Your Amazing Respiratory System** worksheet, one for each student.
- ✓ **What Do You Know?** worksheet, one for each student.

MAKE:

- ✓ Transparency of **Your Amazing Respiratory System**.

PREPARE:

- ✓ ***Capillaries Model*** from **Capillaries Model Directions**.

Procedure

■ Ask students to concentrate on their breathing. Tell them to take a deep breath to feel the air enter and notice how the air moves deep into the chest. Tell them to feel their chests rise and fall. Ask students to try to hold their breath for 45 seconds.

Discuss how the body's sense of urgency increases the longer you hold your breath. Explain that this is the way your body warns you to resume breathing. Tell students to breathe deeply several times and enjoy the relaxation that results.

Explain that the word *breath* comes from the Latin word *spirit*. Perhaps the early Romans believed that with each breath spirits entered or left their bodies.

Point out that the name for our breathing process, respiration, contains that same Latin root. On the board, write RE/SPIR/ATION. Remind students that *"re-"* means again and again, and the suffix *"-ation"* is used to make a word a noun.

Explain that the purpose of this lesson is to learn about the respiratory system, its parts and functions.

■ Distribute **Your Amazing Respiratory System** worksheet. Use a transparency of the worksheet to describe the parts of the respiratory system and explain their functions. Tell students to make notes directly on their worksheets.

Point out the *diaphragm* on the transparency. Tell students its name comes from the Greek word *diaphragma*, meaning fence or wall. This is a wall of muscle that completely separates the thorax (inside chest area) from the abdomen (inside stomach and intestines area).

Tell students the function of the diaphragm is to expand and decrease the size of the chest (also called chest cavity or thorax). This is how air is forced to enter or exit the chest. The muscles between the ribs help the diaphragm do its work.

Tell students that the diaphragm usually moves smoothly up and down all by itself, according to signals that control this automatic action. But when the signals come too close together, this smooth sheet of muscle moves in quick, jerky movements. These movements—coordinated with a snapping together of the vocal cords—produce hiccups. Even unborn babies get hiccups!

Point out the *nose* and *nasal passages*. Tell students their function is to warm or cool and clean the air. Sinuses, hairs and tonsils trap larger dirt particles as they rush in with each breath. These larger particles crash into and stick on mucus-coated membranes that line the twisting cavities.

Tell students the *mouth* is another important part of the respiratory system. It also warms or cools the air we breathe. Mucus traps the foreign particles. The body's own chemicals destroy most germs in the mouth—or if swallowed, in the stomach.

Point out the *trachea* (tray' key uh)—windpipe or air tube. Explain that it is approximately five inches long. Show students a Slinky or

piece of dryer hose to illustrate the cartilage rings that protect the trachea from being flattened. Trachea comes from the Greek word *tracheia*, meaning rough vessel.

Show students a tube sock to illustrate the appearance of the *esophagus* (food tube). This tube is located behind the trachea. The esophagus has no cartilage rings for protection. It is protected by the trachea. It flattens when not in use. *Note*: The esophagus is not shown on the respiratory system illustration.

Point out the *bronchi* (brong' key) *and bronchioles* (brong' key ols) on the transparency. Explain that the trachea divides into two branches called the bronchi. These further divide into bronchioles.

The appearance is much like a branching tree. The trachea looks like the trunk; the bronchi are two large branches; and the many bronchioles are the smaller branches and twigs.

Tell students that *mucus* (mue' cus) *and cilia* (silly' uh) line the trachea, bronchi and bronchioles. Cilia (from the Latin word for "eyelash") are cells like tiny hairs. They sweep foreign particles out of the trachea, bronchi and bronchioles so they can be coughed or sneezed out. Mucus is a sticky fluid that traps germs and dirt.

Point out the *alveoli* (al vee' oh lie), or air sacs, lie at the end of each tiny bronchiole. Tell students the Latin word *alveus* means concave vessel or ball. Show students a bunch of (plastic) grapes to illustrate the alveoli at the ends of the bronchioles.

Demonstrate that the grapes are pliable, as are the alveoli. This enables the alveoli to receive and expel air. Inflate a balloon to represent an air sac. Release the air from the balloon to illustrate how the air sac squeezes air out of the lungs.

Tell students to look at the *lungs*. An adult lung is about the size of a football. One lung has three lobes or sections and the other lung has two. Ask students which lung would be smaller. Why? (The left lung is smaller. This allows room for the heart, which is left of center in the thorax.) The German word *lunge* means of little weight, not heavy.

■ Show the ***Capillaries Model***. Explain how oxygen passes through the thin walls of the alveoli (styrofoam balls) and enters the thin walls of the capillaries (yarn). The capillaries are our smallest

blood vessels. Blood cells move through the capillaries and carry oxygen to all body cells. After delivering oxygen to cells, blood cells then pick up carbon dioxide and return it to the lungs as waste.

Tell students to imagine a tea bag in water to help them visualize how substances pass through what appears to be a solid membrane. Just as the tea seeps through the tea bag, oxygen and carbon dioxide are able to pass through the walls of the alveoli.

■ Ask several students to complete the following sentence: "I think the most important part of the respiratory system is the... because...."

Remind students that the respiratory system is a complex system consisting of many parts that work together in fine precision. This system is in balance with other body systems, such as the nervous system and the circulatory system. Problems in one body system usually affect other systems.

■ Have students brainstorm a list of problems they have heard about that may involve the respiratory system. Tell students to talk to friends or family members about the range of problems that can interfere with the efficient functioning of the respiratory system.

Evaluation

Distribute the **What Do You Know?** worksheet (an unlabeled chart of the respiratory system). Ask students to label each part and describe its function.

Follow-Up/ Extension

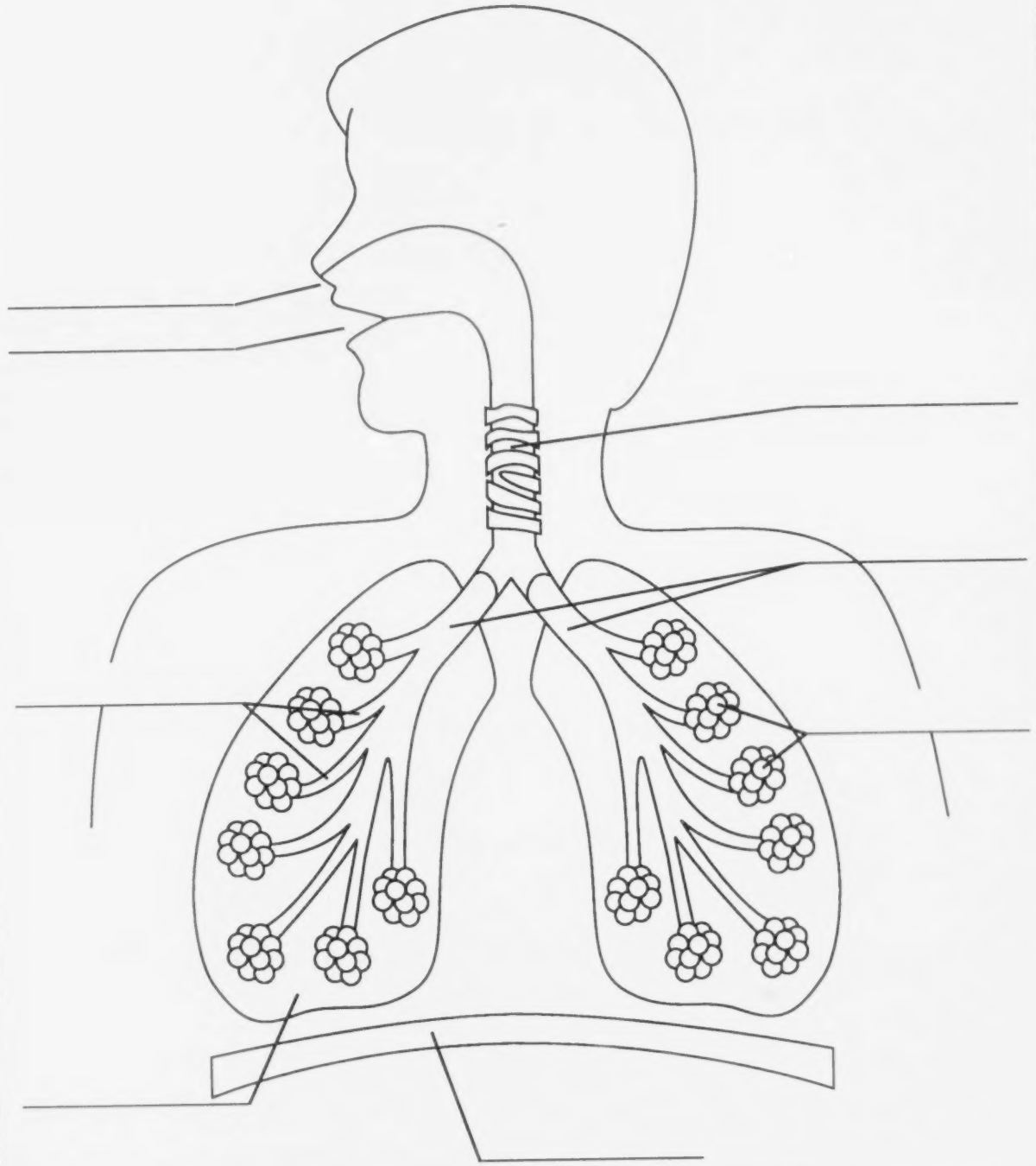
Have students work in small groups to brainstorm a list of materials that could be used to build models of the respiratory system. Materials might include broccoli for the bronchial tree, plastic bags for the lungs, marbles or packing bubbles for the alveoli. Have groups construct models of the respiratory system and present their work to the class.

If you have access to a human torso model from a school science lab or local hospital, provide an opportunity for students to examine the respiratory organs.

Show a film or video that illustrates the parts of the respiratory system. Programs from educational television stations are appropriate. These programs may also be available on loan from public health agencies such as the American Lung Association.

STUDENT

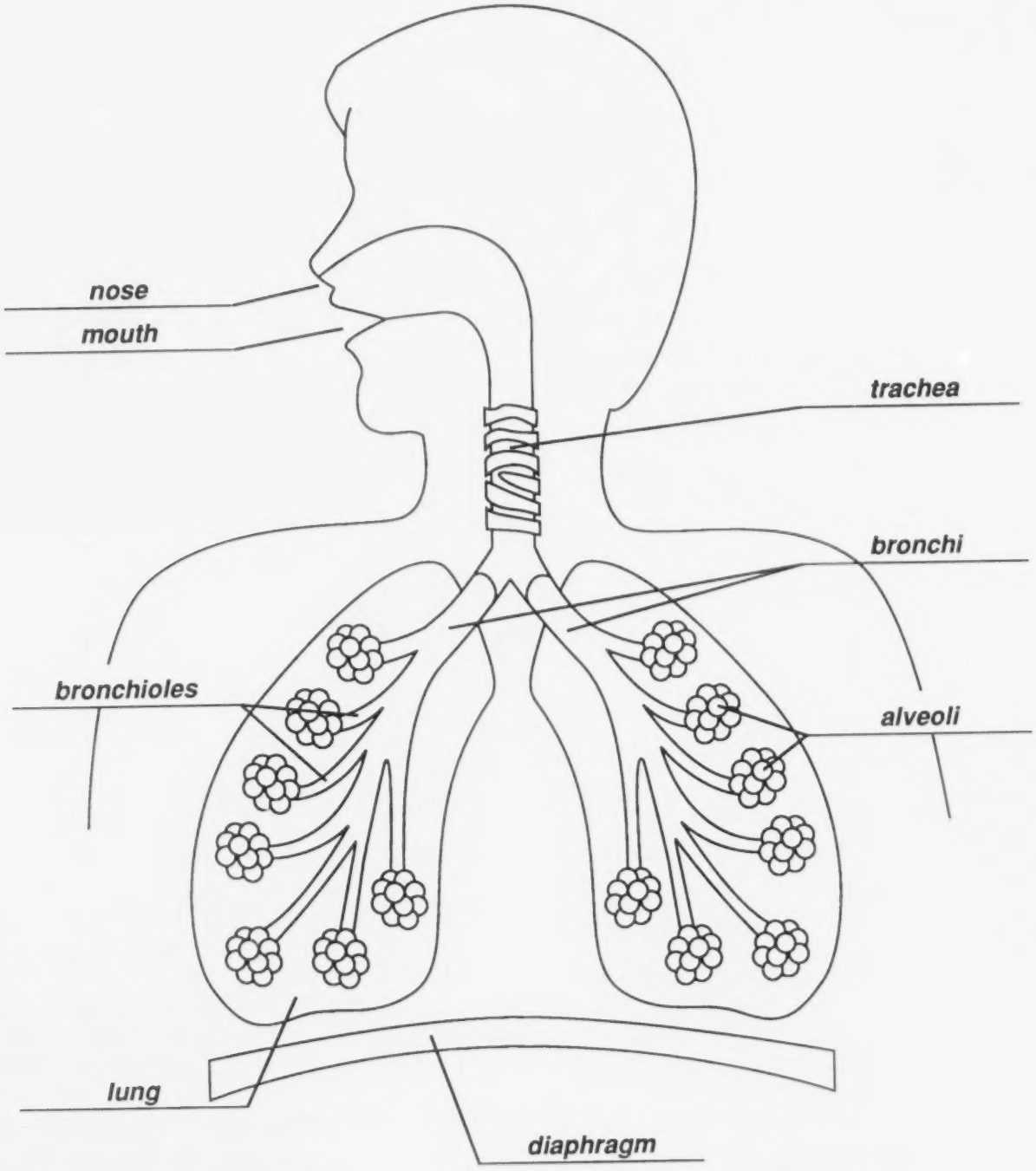
Your Amazing Respiratory System



TEACHER

Your Amazing Respiratory System

Key



Capillaries Model

Directions

Materials

4 styrofoam balls (tennis-ball size)

4 yards of red yarn

4 yards of blue yarn

4 flexible straws

clear or masking tape

3 toothpicks

sharpened pencil

1. Use toothpicks to fasten the balls together.

2. Use a pencil to make a hole in each ball. Stick the flexible end of a straw in each hole.

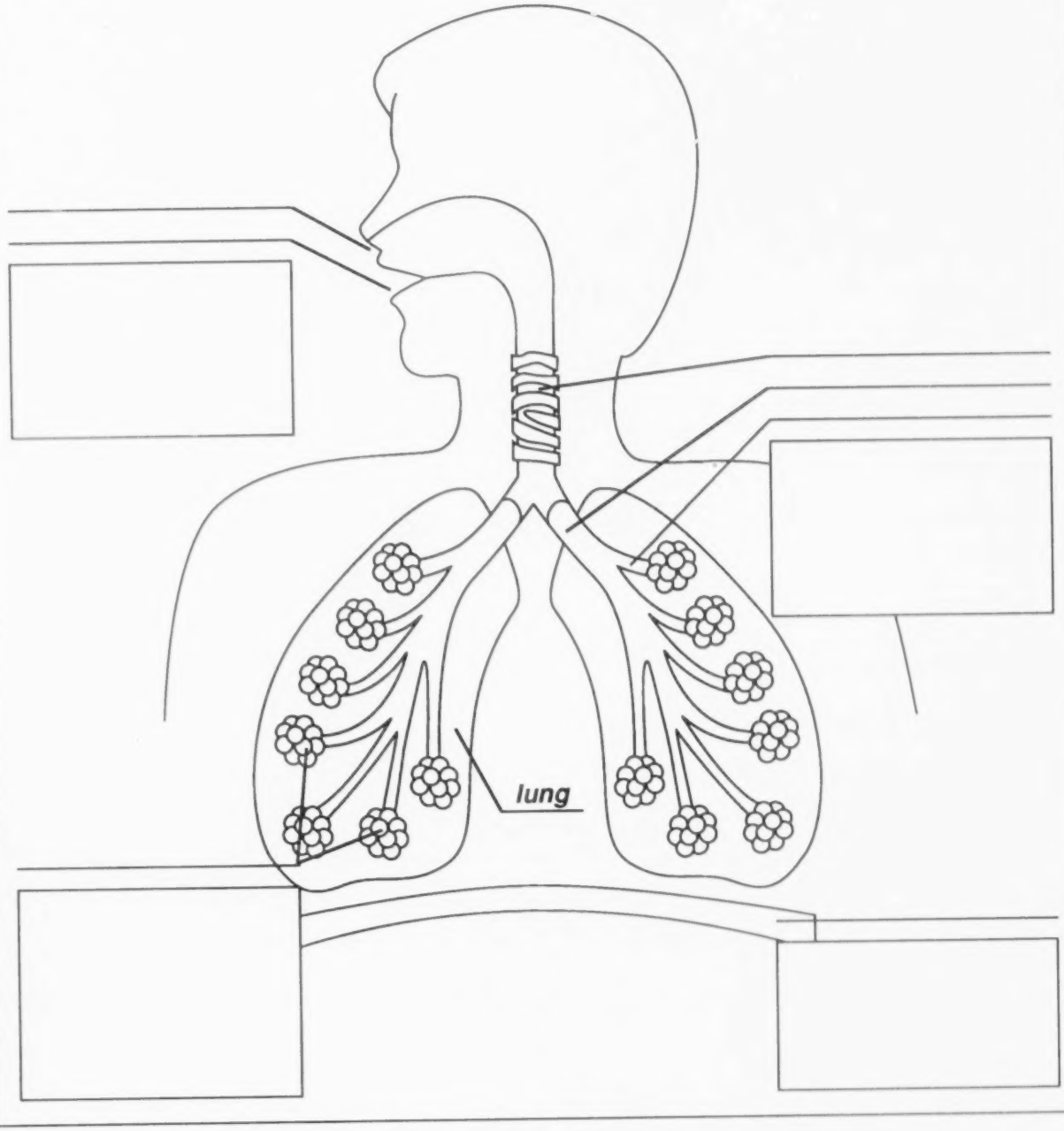
3. Tape the other end of the straws together.

4. Wrap the balls with the red and blue yarn.

STUDENT

What Do You Know?

Directions: Label each part of the respiratory system on the diagram. Then write a brief description of each part in the boxes.

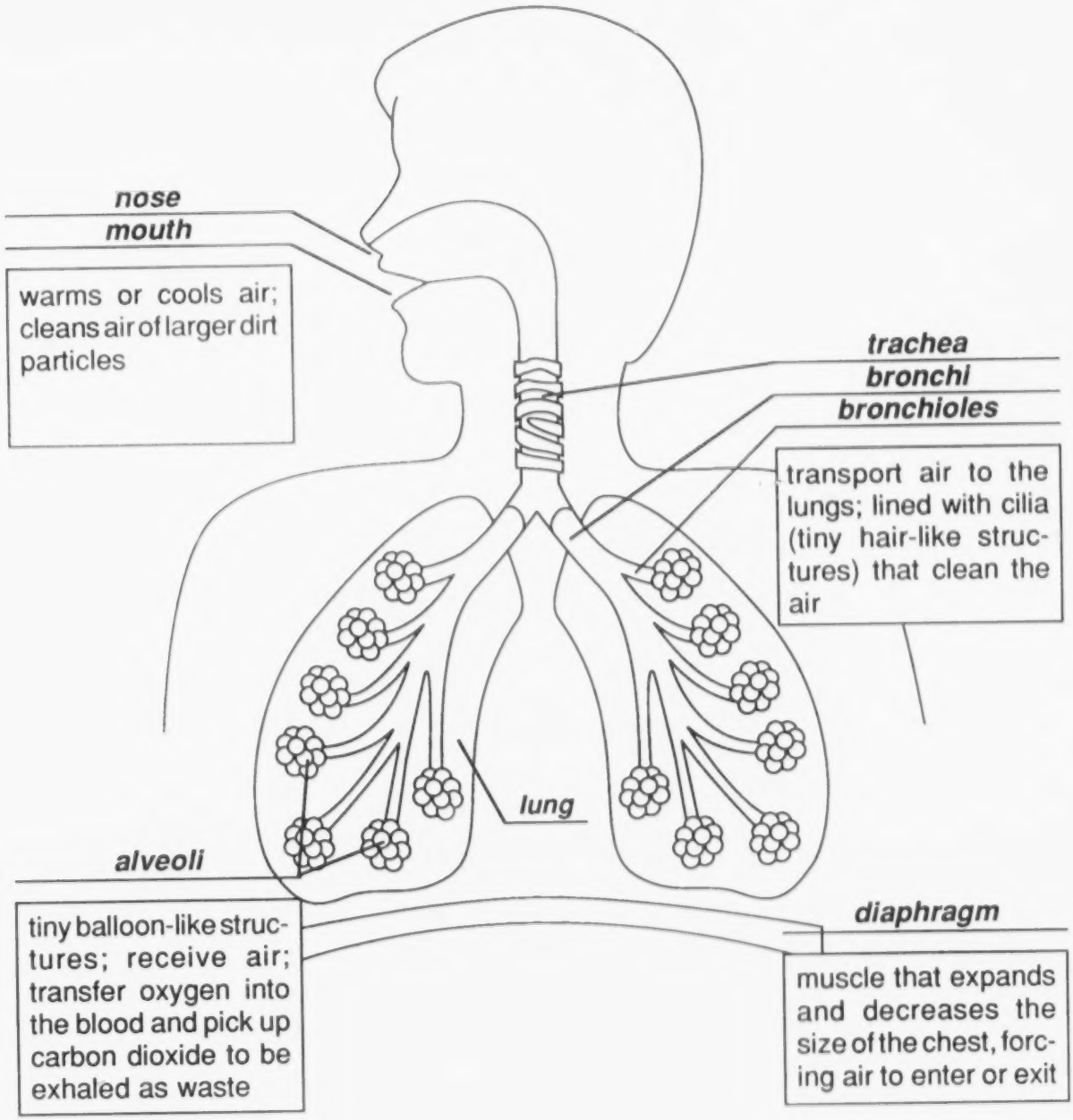


TEACHER

What Do You Know?

Key

Directions: Label each part of the respiratory system on the diagram. Then write a brief description of each part in the boxes.


nose
mouth
warms or cools air; cleans air of larger dirt particles
trachea
bronchi
bronchioles
transport air to the lungs; lined with cilia (tiny hair-like structures) that clean the air
lung
alveoli
tiny balloon-like structures; receive air; transfer oxygen into the blood and pick up carbon dioxide to be exhaled as waste
diaphragm
muscle that expands and decreases the size of the chest, forcing air to enter or exit

LESSON 2

TOBACCO— NO TYPE IS SAFE

Objective

Students will be able to explain why tobacco—in all its common forms (cigarette, cigar, pipe, snuff, chew)—is harmful.

Time

One class period.

Overview

Smoking is declining in the general population in the United States. However, teenage girls continue to smoke more often than teenage boys. There is also growing concern about the use of smokeless tobacco, particularly by teenage boys. Because of these trends, students need to be aware that all forms of tobacco harm our health.

In this lesson, students study the Surgeon General's 1982 statement about smoking. A teacher lecture and examples introduce students to the variety of tobacco forms. A transparency on smoking-related deaths emphasizes the dangers of tobacco use.

Students use a worksheet to interview older students or adults about tobacco use.

Instructional Strategies

Class discussion, teacher lecture, worksheets.

Teacher Materials and Preparation

HAVE:

- ✓ Overhead projector.
- ✓ Transparency marker.

OBTAIN:

- ✓ Samples of tobacco packaging and products—packs of cigarettes, cigars, pipe tobacco, pipe, chew, snuff.
- ✓ Magazines with pictures of tobacco products (optional).

COPY:

- ✓ **Learning from the Past** worksheet, one for each student.

MAKE:

- ✓ Transparency of **Public Health Enemy No.1**.
- ✓ Transparency of **Risking the Future**.

REVIEW:

- ✓ **Teacher Background Information**.
- ✓ **Public Health Enemy No. 1** ***Key***.
- ✓ **Risking the Future** ***Key***.

Procedure

■ Show students the **Public Health Enemy No. 1** transparency. Tell students the statement is from the U.S. Department of Health and Human Services. Tell them to think about their discussion of respiratory problems with family and friends. Ask if anyone can suggest appropriate words to fill in the blank, based on their talks with family and friends.

Guide students to identify *cigarette smoking* as the "...chief, single, avoidable cause of death in our society and the most important

public health issue of our time." Write *cigarette smoking* in the blank on the transparency.

Tell students that since this statement was made in 1982, research has made it clear that *tobacco use* can fill in the blank. Researchers have found that tobacco in any form, not just in cigarettes, is a major health hazard. Cross off *cigarette smoking* on the transparency, and write *tobacco use* in the blank.

■ Show students samples of different tobacco products (cigarette, cigar, pipe, snuff, chew). Write the name of each product on the board as it is presented. Discuss the packaging, appearance and use of the products. Point out and read the warning statements on each product. Use **Teacher Background Information** on tobacco products as a guide for this discussion.

■ Ask students to raise their hands to indicate what they think causes more deaths—murder, traffic accidents or smoking-related diseases? Show students the **Risking the Future** transparency. Fill in the blanks as you discuss the relative risk of these events.

Explain that statistics indicate that if 3,000 middle-school students started smoking today and became regular smokers, during their lifetimes it could be expected that:

- About 23 of the 3,000 will be murdered.
- About 30 of the 3,000 will die in traffic accidents.
- About 750 will be killed by a smoking-related disease (Glynn, 1989).

Encourage students to ask family and friends the same question. Which do they think causes more deaths—murder, traffic accidents or smoking-related diseases? Explain that many people don't know how deadly tobacco really is.

Evaluation

Have students write a paragraph entitled "Why Tobacco is Public Health Enemy No. 1." Assess student understanding of reasons that all forms of tobacco are harmful.

Homework

Distribute the **Learning from the Past** worksheet. Tell students to use the worksheet to interview people about tobacco use.

Follow-Up/ Extension

Have students find magazine pictures of tobacco products and create a collage for display (or draw a mural). Title the display "All forms of tobacco are unsafe!"

Have students research where tobacco is grown, how it is cured and processed, and how it affects the economy through sales and taxes. Students can write to the Department of Agriculture, Washington, DC 20250, for information about tobacco production.

TEACHER BACKGROUND INFORMATION
Tobacco Products and Their Use

1. How is tobacco smoked?

Tobacco is smoked in the form of cigarettes, cigars or in pipes. Cigarettes consist of tobacco rolled in paper. Cigars are made of tobacco rolled in large tobacco leaves. Pipe tobacco is first coarsely ground and packaged by weight; then it is transferred to the bowl of a pipe for smoking.

2. What is smokeless tobacco?

Smokeless tobacco includes both chewing tobacco and snuff. These products contain dried tobacco leaves and a variety of sweeteners, flavorings and scents.

Smokeless tobacco is an industry phrase that paints snuff and chewing tobaccos in favorable terms in an attempt to counter the social unacceptability of smoking.

3. What is spitting tobacco?

Spitting tobacco is a synonym for smokeless tobacco that accurately describes the unsanitary and offensive aspects of the behavior.

4. How is chewing tobacco ("chew") packaged?

In chewing tobacco, the leaf may be shredded (loose-leaf), pressed into bricks or cakes (plugs), or dried and twisted into ropelike strands (twists). A portion is chewed or held in place in the cheek or between the lower lip and the gum. Most chew is sold in 3-ounce packages. Plugs are loose-leaf tobacco pressed into bricks or flat blocks. They are wrapped inside natural tobacco leaves, and then wrapped in clear plastic. Twists are sold by the piece, packaged in plastic bags. Most twist is sold without flavoring or sweeteners. Loose-leaf and plug tobacco are both generally sweetened and flavored with licorice.

5. How is snuff packaged?

The two categories of snuff—dry and moist—are made from powdered or finely cut tobacco leaves. Users place snuff between their front lip and gum.

"Moist" snuff ("fine cut") is tobacco pressed into fine particles or strips. Some varieties are flavored. The snuff is packaged in cans and plastic containers, typically 1.2 ounces. It has a moisture content of up to 50 percent.

"Dry" snuff is processed into a fine powder with a moisture content of less than 10 percent. It is sold in metal cans or glass containers varying in size from 1.15 to 7.0 ounces.

6. How are chewing tobacco products used?

Loose-leaf tobacco is tucked between the gum and cheek, usually toward the back of the mouth.

Plug and twist tobacco are chewed or held in the cheek or the lower lip, usually for several hours.

7. How is snuff used?

A "pinch" (dry or moist) is placed between the lip or cheek and gum for about 30 minutes. In some countries, including historically the United Kingdom, dry snuff is sniffed through the nose.

8. Why do users of snuff ("dippers") and chewing tobacco ("chewers") have to spit?

- Using smokeless tobacco increases the amount of saliva in the mouth.
- Users do not like to swallow tobacco because it can make them feel sick.

- Smokeless tobacco tastes bad after being in the mouth for a while.

9. What form of smokeless tobacco is most popular among youth?

About 90 percent of young users of smokeless tobacco choose moist snuff. Most young people who use chewing tobacco prefer loose-leaf.

10. What form of smoking tobacco is most popular among youth?

Cigarettes are the most popular form of smoking tobacco.

11. How extensively is smokeless tobacco used?

More than 12 million Americans have used snuff or chewing tobacco within the past year, and more than half of these people are regular users. Males aged 18 to 24 have the highest rate of use.

In some parts of the United States, more teenage boys now use smokeless tobacco than use cigarettes.

12. Who uses smokeless tobacco?

The common profile is:

- males between ages 12 and 25
- males who have friends who use the substance
- males who have family members who use the substance
- males who have less parental disapproval of the use of smokeless tobacco

13. How extensively is tobacco smoked?

Today almost 33 percent of American adults smoke. In 1964, this figure was over 50 percent. Fortunately the number of teen smokers is declining too. For teens (ages 12-17), the rate is only 15 percent.

TEACHER

Public Health Enemy No. 1

The chief, single, avoidable cause
of death in our society
and
the most important public health issue
of our time is ...

— C. Everett Koop
U.S. Surgeon General 1981-1989

TEACHER

Public Health Enemy No. 1

Key

The chief, single, avoidable cause
of death in our society
and
the most important public health issue
of our time is ...

~~*Cigarette Smoking*~~

Tobacco use

— C. Everett Koop
U.S. Surgeon General 1981-1989

TEACHER

Risking the Future

During the lifetimes of 3,000 regular smokers,
it can be expected that:

About _____ will be murdered.

About _____ will die in traffic accidents.

About _____ will be killed by a smoking-related disease.

TEACHER

Risking the Future

Key

During the lifetimes of 3,000 regular smokers, it can be expected that:

About ***23*** will be murdered.

About ***30*** will die in traffic accidents.

About ***750*** will be killed by a smoking-related disease.

STUDENT

Learning from the Past

Part 1

Directions: Ask a person older than you (in your home or neighborhood) to answer the following questions:

1. Why did you choose to use or not use tobacco?

2. Are you happy with your choice?

3. How old were you when you made a decision about tobacco use?

Part 2

Directions: Ask anyone older than you who has tried tobacco to answer the following questions:

1. How did your body feel after your first experience with tobacco?

2. How did you feel about yourself?

3. Now how do you feel about your decision? Why?

LESSON 3

HAZARDOUS TO YOUR HEALTH

Objective

Students will be able to describe the physical effects of nicotine and tar.

Time

One or two class periods.

Overview

Many adults started using tobacco before the health hazards of tobacco were known. Because tobacco is physically and psychologically addictive, people have a difficult time breaking the addiction. Today's youth have the advantage of knowing about the dangers of tobacco use.

In this lesson, students work in groups to answer questions about tobacco's effects. After class discussion of the responses, students consider the effects of nicotine. Demonstrations emphasize the health hazards of tobacco use.

Instructional Strategies

Class discussion, cooperative learning groups, worksheets.

Teacher Materials and Preparation

OBTAIN:

- ✓ Drinking straws, one approximately three-inch section for each student.
- ✓ A dozen books (any kind).
- ✓ One bottle of thick, dark syrup or molasses (at least one cup).
- ✓ Eight one-ounce test tubes or a tall, thin, clear container that holds one cup of liquid.
- ✓ Ten-inch balloons, one (or two) per student.
- ✓ Clock or watch with a second hand.
- ✓ Two sponges, one damp and one dry and hard.
- ✓ Materials for ***Smoking Machine***.

COPY:

- ✓ **What We Know About Tobacco** worksheet, one for each student.
- ✓ **The Twelve Puffs of Tobacco** worksheet, one for each student.

PREPARE:

- ✓ Fill a water balloon with one cup of water. (*Optional*: Prepare a water balloon for each student.)
- ✓ ***Smoking Machine*** from **How to Make a Smoking Machine**. (Do this before class in an open area. Otherwise, the smoke and smell will fill your classroom and become a health threat to you and your students!)
- ✓ Word cards for *ammonia*, *carbon monoxide*, *cadmium*, *phenol*, *pyridine*.

REVIEW:

- ✓ **What We Know About Tobacco *Key***.

Procedure

■ Ask students to share responses on the **Learning from the Past** worksheet. How did people feel after using tobacco for the first time? (Possible answers include feeling sick to the stomach, getting a headache, becoming dizzy, etc.)

Tell students that this lesson deals with the physical effects of tobacco on the body.

■ Distribute the **What We Know About Tobacco** worksheet. Divide the class into small groups. Have students work in their groups to answer the questions.

When students have completed the worksheet, discuss the answers. Use the **What We Know About Tobacco *Key*** as a guide for this discussion.

■ Have students take their pulses. Determine an average pulse rate for the class. (An average pulse rate is 80 beats per minute.)

Tell students that nicotine is a stimulant drug. This means it speeds up the heart rate. Smoking also decreases the amount of oxygen in the blood. The result for smokers is an increased pulse rate.

To demonstrate the effects of nicotine on the heart, squeeze a small water balloon in your hand to illustrate the work of the heart. Let students use their empty hands (or water balloons) to experience how much work it is to pump 80 times per minute (or use the class's average pulse rate).

Have students squeeze their fists or the balloons at that rhythm until you see that most students are tiring. Then explain that nicotine makes the heart beat about ten times per minute faster than normal. Ask students if they would like to increase their cadence to 90 beats per minute.

Explain that nicotine has many contradictory effects. One example is that it first causes users to be stimulated or excited, and then causes them to feel depressed or let down. To feel good, a person with nicotine addiction needs a boost (additional nicotine) about every 30 minutes. Regardless of the type of tobacco used (even nicotine gum), nicotine takes effect within minutes.

■ To illustrate the amount of tar that reaches the lungs of a smoker, show students the ***Smoking Machine***. Explain how you prepared the demonstration. Then ask students the following questions:

- What do you notice as you compare the cotton ball on the outside to the cotton inside? (The cotton inside is stained brownish-black.)

- What does this suggest about how tobacco smoke affects the lungs of a smoker? (It blackens them.)
- The substance you see on the cotton is tar. What does tar do to the lungs? (Tar coats the lungs, coating air sacs (alveoli) with cancer-causing chemicals and destroying them.)
- Can nonsmokers inhale tar? (Yes, if they breathe tobacco smoke.)
- Does that mean that children and pets can have tar-stained lungs? (Definitely, if they breathe tobacco smoke.)

Explain that low-tar cigarettes and filters help somewhat, but the effect is minimal compared to giving up smoking altogether. There is no safe tobacco. Some filter cigarettes have a higher nicotine and tar content than other nonfilter brands.

■ Demonstrate the amount of tar that a pack-a-day smoker would inhale in just one year (approximately one cupful, according to the American Cancer Society). Pour thick, dark syrup or molasses slowly into a tall, thin, clear container (or eight one-ounce test tubes). Let students guess when you will stop pouring.

■ To demonstrate the effect of tar on cilia, have students form a line and pass a dozen books, bucket-brigade style, quickly from one end of the line to the other. Then tell students to pretend they are standing shoulder-deep in gooey tar. To show how difficult the task would become, provide some resistance by holding students' arms as they pass the books.

Read the following poem and discuss students' reactions:

Soft and silly, uh ... cilia
Tickle my trachea.
Busy in my bronchi,
Sweeping and sweeping ... Achoo!

Stiff, still cilia,
Tar-soaked in my trachea,
Broken on my bronchi.
Stiff and still ... silent.

■ Measure lung capacity by giving each student a ten-inch balloon. Tell students to blow up the balloons several times to make them stretchy. Then have students blow as much air as they can in one breath into their empty balloons.

Compare the balloon sizes to note rough measures of lung capacity. Ask students how well they think smokers would do. (Smokers would have noticeably smaller lung capacities.)

■ Allow students to compare the feel of a damp, soft sponge and a dry, hard sponge. Tell students the sponges demonstrate the difference between healthy lung tissue and lung tissue that has been hardened by tar. Once the alveoli are hardened, they pop like sheets of plastic packing bubbles. They can no longer squeeze out air.

Repeat the Lesson 1 demonstration of a balloon expelling air to represent the work of healthy air sacs (alveoli). Now try to do the same with a balloon that has been cut, representing a broken alveolus. Tell students that the disease emphysema destroys air sacs. Breathing becomes so difficult that even walking across the room is a major effort.

■ Give each student a three-inch section of drinking straw. Tell students to run in place for one minute. (*Caution*: Allow only students without health restrictions to participate.) Then have students breathe only through the sections of straw in their mouths. They should resume normal breathing before they feel too uncomfortable.

Tell students the effort to breathe through a straw resembles the agony of emphysema's characteristic shortness of breath. (Biting gently on the straw simulates an even more severe case of emphysema.)

Discuss student reactions. Did they need a gulp of air? People with emphysema never get that gulp.

■ Show students word cards for some of the chemicals found in cigarettes. Briefly discuss each of the following:

- *Ammonia*—used as a common cleaning fluid. Fumes are harmful to the body.
- *Carbon monoxide*—takes up space in the blood, crowding out oxygen that the blood should be delivering to cells.
- *Cadmium* (cad' me um)—a metal that settles and stays in the lungs. It has a detrimental effect on the immune system.
- *Phenol* (fee' nole)—changes jelly-like cell proteins to resemble fried eggs; used as a solvent.

- *Pyridine* (pir' i dean)—used as an industrial solvent. It has a negative impact on the heart's action.

■ Lead students to conclude that a decision not to use tobacco is the only wise decision.

Evaluation

Tell students to pretend to be the body of a tobacco user and write a letter of complaint to the brain. Students should explain the problems that result from tobacco use.

Check for student understanding during class discussion of the **What We Know About Tobacco** worksheet by having students identify and correct misinformation from the group discussions.

Homework

Have students work alone or with partners to write a poem, a rap or a song, or create a drawing to describe the effects of tobacco.

Follow-Up/ Extension

Distribute **The Twelve Puffs of Tobacco** worksheet. Assign each student a day (puff) in the song. Tell students to stand up quickly each time their day (puff) is sung. Have the class sing the song.

Write thank-you letters to a friend or family member who is a nonuser.

STUDENT

What We Know About Tobacco

Directions: Discuss each statement with your group. Decide whether the statement is true or false. Write *True* or *False* in the blank.

_____ 1. All forms of tobacco are harmful.

_____ 2. Tobacco contains a drug that is addictive.

_____ 3. Nicotine slows the heart rate.

_____ 4. Tobacco smoke contains a sticky, tar-like substance that makes people cough.

_____ 5. Tobacco smoke contains poisons.

_____ 6. Smokers' lungs usually hold more air than nonsmokers' lungs.

_____ 7. Tar contains substances that can cause cancer.

_____ 8. Snuff and chew are safe substitutes for smoking.

_____ 9. Lung cancer is the only serious disease associated with tobacco use.

_____ 10. No matter how long you have used tobacco, your body attempts to repair all tobacco-related damage when you quit.

_____ 11. Most doctors use tobacco.

_____ 12. Most teenage tobacco users are addicted to nicotine.

TEACHER

What We Know About Tobacco

Key

Directions: Discuss each statement with your group. Decide whether the statement is true or false. Write *True* or *False* in the blank.

True 1. All forms of tobacco are harmful.

All tobacco contains the drug nicotine. Nicotine, in the words of the American Medical Association, is our most deadly addictive drug. A single drop of nicotine on the tongue can kill a person.

In smokers, the drug nicotine is absorbed in the lungs. For users of chew and snuff, the nicotine is absorbed through the membranes of the mouth and nose. Within minutes, the nicotine levels in the blood are the same, whether smoking tobacco or smokeless tobacco was used.

Nicotine can be absorbed through the skin. There have been cases of poisoning after skin contact with pesticides containing nicotine.

Nicotine freely crosses the placenta to an unborn child. It has been found in amniotic fluid and the umbilical cord blood. Nicotine is found in breast milk. Nicotine has been found to cause low birth weights, which increase the chance of infant death. Babies born to smokers are less healthy than babies born to nonsmokers.

True 2. Tobacco contains a drug that is addictive.

The drug is nicotine, and it is addictive. It changes the chemistry of the brain to cause a craving for more of the drug. Giving up the drug can result in withdrawal symptoms—nausea, headache, shakiness, drowsiness, irritability, difficulty in concentrating and a generally miserable feeling.

False 3. Nicotine slows the heart rate.

Nicotine not only increases the heart rate, it also raises blood pressure. This leads to increased risk of heart attack and stroke. In addition, nicotine constricts small blood vessels (capillaries), which causes hands and feet to feel cold. Nicotine also contributes to peptic ulcers.

False 4. Tobacco smoke contains a sticky, tar-like substance that makes people cough.

The tar in tobacco smoke paralyzes the cilia, preventing the cilia from sweeping clean the respiratory passages. With the cilia motionless, dirt, germs and mucus move deeper into the respiratory system. About an hour after someone stops smoking, the cilia go back to work.

"Smokers' cough" generally occurs when the cilia have resumed cleaning. The smoker is coughing out the matter that's accumulated in the respiratory system. Many smokers quickly have a cigarette when they start to cough. Then the cilia stop moving again. All the matter oozes back toward the lungs, instead of being coughed out.

True 5. Tobacco smoke contains poisons.

Nicotine is extremely poisonous. Tar contains several different poisons. The poisons include:

- *Hydrogen sulfide, with its familiar smell of rotten eggs, is very toxic.*
- *Hydrogen cyanide is the gas used in the gas chamber.*
- *Arsenic is a well-known poison.*
- *Benzene is a poison that was prohibited by law from its use in paint thinners.*
- *Formaldehyde is often used as an insecticide, as well as a preservative and a disinfectant.*

False 6. Smokers' lungs usually hold more air than nonsmokers' lungs.

The tar in cigarette smoke cools inside the lungs, forming a sticky substance that damages the delicate alveoli. The effect of the tar can be compared to changing a juicy grape to a raisin. The elasticity and suppleness of the alveoli are destroyed, making it difficult for the lungs to inhale the same quantity of air.

True 7. Tar contains substances that can cause cancer.

Tar is made up of dozens of chemicals. Some are poisonous, some are harmless, and some are cancer-causing (carcinogens).

False 8. Snuff and chew are safe substitutes for smoking.

No form of tobacco is safe. All tobacco contains nicotine and carcinogens. There are at least three kinds of carcinogens found in smokeless tobacco (nitrosamines, polonium 210 and polynuclear aromatic hydrocarbons). Other carcinogens may be present, depending on where the tobacco is grown and how it is processed.

Sugar is frequently used as a flavoring in chewing tobacco. Sugar is known to cause tooth decay. Other flavorings could include wintergreen, spearmint or wood smoke. Wood smoke has been found to increase the risk of cancer.

False 9. Lung cancer is the only serious disease associated with tobacco use.

The three major diseases associated with smoking are lung cancer, heart disease and emphysema. There is no question that cigarette smoking is the main cause of lung cancer. The evidence is overwhelming. Smoking is also the major cause of bronchitis and emphysema. Thirty to forty percent of deaths related to the heart or circulatory system are attributed to tobacco use.

Many parts of the body come into contact with the cancer-causing elements of tobacco—the mouth, lip, throat, esophagus, larynx, lung, stomach, kidney and bladder. Evidence of damage to the throat, esophagus, stomach, kidneys and bladder is inconclusive at present.

True 10. No matter how long you have used tobacco, your body attempts to repair all tobacco-related damage when you quit.

For ex-smokers, the death rate from heart attack decreases as the time away from tobacco increases, until it is close to the rate for people who have never smoked. When you stop using tobacco, some of the tissues that have been affected gradually return to normal. However, if damage is severe, it may be beyond repair.

False 11. Most doctors use tobacco.

Surveys have shown that thousands of doctors have stopped smoking. Tobacco use in many parts of the country is declining.

False 12. Most teenage tobacco users are addicted to nicotine.

Nicotine is addicting. However, the strength of the addiction and the habits of tobacco use are usually not as strong in teenage tobacco users or beginning users. When these people decide that they want to quit and are determined to quit, the chances for success are excellent. Long-time users can certainly break the habit and the addiction as well. But "quitting" seems more difficult when the tobacco habit has spanned a longer period of time.

How to Make a Smoking Machine

Supplies: Plastic 2-liter cola bottle or detergent bottle
6" plastic or rubber tubing, available from hardware store
Clay to seal hole in cap
Cotton balls (approximately 10)
Nonfilter cigarettes (one pack)
Matches or lighter
Tape

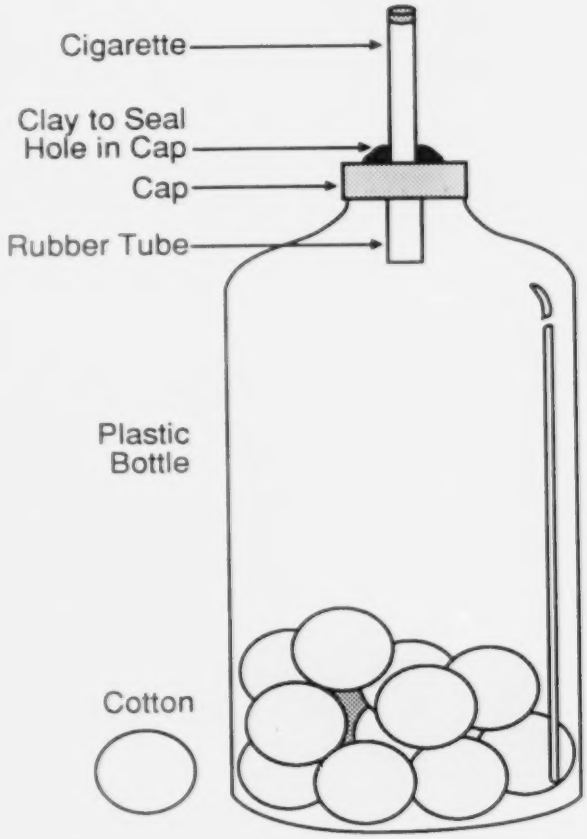
Procedures:

Making the Smoking Machine

- Carefully cut a hole in the bottle cap the size of the tubing.
- Push the tubing through the hole.
- Seal the sides of the hole with clay.
- Tape one cotton ball to the outside of the bottle.
- Place remaining cotton balls in the bottle.
- Screw the cap onto the bottle.

Using the Smoking Machine

- Press the bottle to force out air.
- Place an unlit cigarette in the tubing.
- Carefully light the cigarette.
- Begin slowly pumping the bottle.
- When pushing the air out of the bottle, it may be necessary to unscrew the cap.
- When the cigarette has been completely smoked, extinguish it. Use the machine to smoke enough cigarettes to leave a visible deposit of tar on the cotton balls in the bottle.



Adapted with permission from Evans, Dale and Giarratano, Susan. 1990. *Into adolescence: Avoiding drugs.* Santa Cruz, CA: Network Publications.

STUDENT

Twelve Puffs of Tobacco

(Sung to the tune of *Twelve Days of Christmas*)

On the first puff of tobacco, tobacco gave to me, **a habit I can never seem to break.**

On the second puff of tobacco, tobacco gave to me, **foul-smelling breath...**

On the third puff of tobacco, tobacco gave to me, **stained fingers...**

On the fourth puff of tobacco, tobacco gave to me, **tar in my lungs...**

On the fifth puff of tobacco, tobacco gave to me, **emphysema, too!**

On the sixth puff of tobacco, tobacco gave to me, **poisons in my blood...**

On the seventh puff of tobacco, tobacco gave to me, **eyes red and watery...**

On the eighth puff of tobacco, tobacco gave to me, **cancer in my body...**

On the ninth puff of tobacco, tobacco gave to me, **a heart that is racing...**

On the tenth puff of tobacco, tobacco gave to me, **hair and clothes that smell bad...**

On the eleventh puff of tobacco, tobacco gave to me, **loud, raspy coughing...**

On the twelfth puff of tobacco, tobacco gave to me, **burn holes in my clothing...**

Other suggestions: more air pollution

less lung capacity

more frequent colds

LESSON
4

BLOWING SMOKE

Objectives

Students will be able to describe the effects of tobacco use on others.

Students will be able to demonstrate ways to communicate their feelings about tobacco use.

Time

One class period.

Overview

Students must be informed about the dangers of all smoking, including sidestream and secondhand smoke. Recent research and reports issued by prestigious scientific institutions and the U.S. Surgeon General have documented the effects of tobacco smoke on the nonsmoker.

In this lesson, students discuss secondhand and sidestream smoke. A tar-stained handkerchief illustrates the amount of tar in

smoke. Students brainstorm a list of the short- and long-term effects of smoke. A "Dear Gabby" letter prompts discussion about other ways tobacco use affects individuals. Students learn and practice *I messages* as a way to communicate feelings about tobacco use.

Instructional Strategies

Brainstorming, class discussion, cooperative learning groups, teacher lecture, worksheets.

Teacher Materials and Preparation

HAVE:

✓ Chalk and chalkboard.

OBTAIN:

✓ Spray bottle of colored water.

COPY:

✓ **Smoke Alarm** (student background information), one for each student.
✓ **Dear Gabby Letter**, one for each student.
✓ **Sending a Message** worksheet, one for each student.

PREPARE:

✓ Tar-stained handkerchief. Ask a smoker to exhale smoke through the handkerchief enough times to leave a visible tar stain.

Procedure

■ As appropriate, have student volunteers share their homework projects from Lesson 3. Encourage positive reinforcement to enhance self-esteem. Encourage all students to participate.

■ Spray colored water from a spray bottle into the air as you move among the students. Ask students how they would react if they thought you were spraying perfume. What if you were spraying a deadly poison? a virus? tobacco smoke?

Explain that in this lesson, students will examine the effects of tobacco smoke on nonsmokers.

Write SIDESTREAM and SECONDHAND on the chalkboard. Tell students these are two kinds of tobacco smoke that affect nonsmokers. Lead the class to define sidestream smoke as the smoke from the burning end of smoking products. Secondhand smoke is smoke that has been inhaled by the smoker and then breathed out.

■ Display the tar-stained handkerchief. Explain that a smoker exhaled tobacco smoke through the handkerchief. Tell students the tar in tobacco smoke made the stains. Walk around the classroom and show the handkerchief stain to each student.

Remind students that this smoke had already been in the lungs of the smoker. What does that tell nonsmokers about exhaled smoke from smokers? (It is harmful to everyone.)

Explain that nicotine is also present in both secondhand and sidestream smoke. Tell students that tar, nicotine and other harmful substances in tobacco smoke pose a health threat to nearby nonsmokers, even family pets. (Some people have only decided to quit using tobacco after learning that their pets were adversely affected.)

Ask students whether secondhand or sidestream smoke would be more dangerous to nearby nonsmokers. Sidestream smoke is more dangerous, because it has not had any components removed by the smoker's respiratory system.

■ Have students brainstorm a list of the effects of tobacco smoke on nonsmokers (include pets, children and unborn babies). Then distribute the **Smoke Alarm** student background information. Allow students to read it. Supplement the list students brainstormed with information from the student page **Smoke Alarm**.

■ Have students brainstorm other ways that tobacco use affects friends and relatives, the economy, the medical care system, insurance rates, law enforcement activities and relationships.

Distribute the **Dear Gabby Letter**. Have students read it and respond. When students have completed their responses, discuss student feelings about the letter.

■ Present the following data, as reported in the American Lung Association (ALA) publication *Tobacco's Toll on America*. (You can revise statistics each year by calling the local affiliate of the ALA.)

- Smoking kills more people every year than all other drugs and alcohol combined.
- Smoking kills eight times as many Americans each year as die in motor vehicle accidents.
- Smoking kills more Americans each year than died in battle in World War II and Vietnam put together.
- Fires that are started by cigarettes kill about 1,600 people and cause about 4,000 injuries each year in the United States alone.
- In one year, Americans lost property valued at $410 million in fires caused by smoking.
- According to one estimate, the costs of smoking due to health care and lost productivity amount to $54 billion ($30.4 billion per year in lost work and productivity; $23.3 billion in medical costs).
- A middle-aged man who smokes heavily will lose $34,000 during his lifetime because of extra medical bills and lost income.
- If tobacco users paid more of these costs by paying a tax on tobacco products, the tax on cigarettes would run at least $2.00 per pack.
- Employees who use tobacco are less productive, are absent more often and cost the employer higher insurance premiums. They also decrease morale by creating situations where people complain about having to breathe tobacco smoke.
- Most states now have laws limiting smoking in public places, and a growing number of states, counties and towns have laws that govern smoking in the workplace.

■ Tell students to think about situations or circumstances in which they might want to ask a tobacco user to stop, but would feel uncomfortable doing so. Have them write these situations down. Then divide the class into small groups.

Have groups discuss the situations and the reasons students would feel uncomfortable asking the user to stop. Ask students in the group to suggest ways to deal with this discomfort. Discuss the groups' suggestions with the rest of the class, as time permits.

■ Tell students that *I messages* are one way to communicate feelings without attacking the individual. *I messages are expressed* as follows:

- When you (*describe the person's behavior*), I feel (*describe your feeling*) because (*explain your reason*).

Examples of *I messages*:

"When you hold your cigarette near me, I feel uncomfortable because I have trouble breathing."

"When you smoke your pipe after dinner when we're watching TV, I feel annoyed because the smell gets into my clothes and hair."

Example without an *I message*:

"When you chew tobacco, I think you look disgusting because you spit all the time."

In this example, the feeling was not named—a thought was described. If you can substitute the words "I think" for the intended "I feel," you know that you need to rework the *I message*. Have students suggest a good *I message* for this example.

■ Divide the class into small groups. Tell groups to create *I messages* in response to the uncomfortable situations and circumstances the students described earlier. Ask for student volunteers to share *I messages* about the use of tobacco products.

Evaluation

Tell students to rewrite their personal reactions to the **Dear Gabby Letter** on the worksheet. Check for students' understanding of ways smoke can affect others.

Have students write *I messages* that communicate feelings about tobacco use for each of the scenarios on the **Sending a Message** worksheet. Plan time for students to share and discuss I messages.

Follow-Up/ Extension

Have students write letters to restaurants or other local establishments to encourage smoke-free policies.

Have students make posters to educate the public about the effects secondhand and sidestream smoke have on nonsmokers.

STUDENT

Smoke Alarm

Nonsmokers and Smoke

More than 40,000 studies have demonstrated the harm done by smoking. But surveys indicate that many Americans still don't know the dangers of smoking tobacco. Nonsmokers are also affected by tobacco smoke. Researchers have found that nonsmokers who live with smokers are more likely to have lung-related problems.

Nonsmokers breathe two kinds of smoke when they are around smokers:

- sidestream smoke (from the tip of a burning cigarette)
- secondhand smoke (the smoke exhaled from the smoker's lungs)

Nicotine is found in both sidestream smoke and secondhand smoke. Even pets can breathe sidestream smoke and secondhand smoke.

Effects of Tobacco Smoke

Tobacco smoke contains dirt particles that pollute the respiratory system. Hot smoke dries the linings of the airways, which makes them sore.

Smoke causes eyes to become red and watery. Smoke also causes hair and clothes to smell like smoke.

Tobacco smoke contains poisons. The poisons paralyze the cilia and prevent cilia from cleaning the airways. When cilia can't work, smoke leaves behind more dirt. This causes increased mucus production. Then airways get clogged with mucus. Increased mucus results in increased coughing.

Mucus build-up in the warm, moist lungs invites infections to grow. Smokers and people who live with smokers have more colds and other infections of the respiratory system. Before smoking became common, bronchitis and emphysema were rare diseases.

Tobacco smoke contains carbon monoxide, which crowds oxygen out of the blood. Then smokers feel tired. Carbon monoxide, by crowding oxygen out of the blood, causes shortness of breath.

Irritation from tobacco smoke can cause alveoli deep in the lungs to break. As more and more alveoli break, less transfer of oxygen takes place. Then smokers can't get enough oxygen in their blood.

STUDENT

Tar in tobacco smoke coats the cilia, preventing them from sweeping the lungs. More coughing occurs because the cilia are paralyzed. The cough helps clean the respiratory system when the regular system is overworked.

Tar causes alveoli to blacken and to become stiff and brittle. Eventually, they break. Broken alveoli decrease lung capacity.

Did you know that:

- Most cases of lung cancer are caused by smoking.
- Most people with lung cancer die from the disease.
- Smoking is addictive.
- Even light smoking (less than ten cigarettes a day) is dangerous.
- Smoking is hazardous to your health!

STUDENT

Dear Gabby Letter

Directions: Read the following letter to "Dear Gabby" and write a response. What are your feelings about this letter? Can they be supported by fact?

Dear Gabby:

I am a longtime reader of your column. I am writing to tell you that I'm tired of people telling me not to smoke. It is *my* body, and I can do what I want to my body. I don't tell my friends to smoke cigarettes. And I don't think they should tell me not to smoke. What do you think?

Signed:
It's My Body and I'll Smoke if I Want To

Dear It's My Body and I'll Smoke if I Want To: _____

STUDENT

Sending a Message

Directions: Read the following scenarios. Think about how you could communicate your feelings about tobacco use. Then answer the questions about each scenario.

1. You are with someone special who takes out a tin and begins to use snuff. You never knew this person was a tobacco user.

   a. How would you feel?

   b. Write an *I message* that would communicate this feeling.

   c. Would you express your feelings this way? Why or why or not?

2. Your friend's parent has agreed to drive you 50 miles to the soccer game. After five minutes in the car, the parent lights a cigarette. All the car windows are closed.

   a. How would you feel?

   b. Write an *I message* that would communicate your feelings.

   c. Would you express your feelings this way? Why or why not?

LESSON
5

MAKING DECISIONS

Objective

Students will be able to identify factors that influence decisions about tobacco use.

Time

One class period.

Overview

The behaviors and attitudes of family and friends are the main influences on decisions about tobacco use. Students need to be aware of these influences.

In this lesson, students use a worksheet and class discussion to identify factors influencing their decisions. Students work in small groups to brainstorm circumstances that affect decisions about tobacco use. Groups share strategies to create a no-use environment. An optional roleplay activity deals with ways to avoid unwanted influences.

Instructional Strategies

Brainstorming, class discussion, roleplays (optional), worksheets.

Teacher Materials and Preparation

HAVE:

✓ Chalk and chalkboard.

✓ Video camera, tape and playback equipment (optional).

COPY:

✓ **Decisions, Decisions** worksheet, one for each student.

Procedure

■ Explain that the purpose of this lesson is to help students become aware of influences that affect their daily behaviors and choices.

Tell students that the behaviors and attitudes of family and friends have the greatest influence on their decision whether or not to use tobacco. Acknowledge that attitudes toward tobacco use vary. Families choose different neighborhoods, different houses, different vehicles and different routines. They also have different attitudes, including attitudes about the use of tobacco.

Some families have no tobacco users, some have one, and some have two or more adult users. Some families say it's OK for adults to use tobacco, but not for their children. Some say it's not OK for anyone to use tobacco.

Some family members don't agree about tobacco use. They may argue about it. Other people think it's OK to smoke at some times or in some places, but not at others.

Ask students to think about their attitudes about tobacco use. How many of their attitudes reflect the attitudes of their families or friends? Encourage students to put aside their old attitudes during these lessons. Ask students if facts about tobacco might cause them to choose new attitudes.

List the following factors on the board. Briefly discuss how each might influence a person's decision to use or not to use tobacco:

- age
- self-esteem
- setting
- how much they have already thought about the decision
- whether friends support the decision
- knowledge of the consequences
- whether tobacco is easily available
- mood
- attitude toward tobacco use
- advertising

■ On the board, write MAJOR, MODERATE and MINOR. Ask students to name some examples of major decisions that they have made or will make in their lifetimes. Write these on the board. Do the same for moderate and minor decisions.

Distribute the **Decisions, Decisions** worksheet. Tell students to list decisions from the board on the worksheet and identify possible influences on their decisions. (If you were going to ..., what would influence your decision?)

Use the following questions to guide class discussion of the worksheet responses:

- What categories of influences can we find? (relatives, friends, TV, magazines, billboard ads, fashions, expectations, sales-people, cost, other)
- What patterns did you recognize?
- What are the major influences in your life?
- Are you satisfied with the degree to which you are affected by outside influences?
- What were the influences listed for tobacco use?

■ Divide the class into small groups. Tell students to brainstorm some situations in which teens are likely to decide to use tobacco. Ask students to discuss how changes in those circumstances could lead to a decision not to use tobacco.

Tell groups to plan strategies that teens can use to avoid unwanted influences. Ask groups to share these strategies with the class.

■ *Optional*: Have groups write roleplays that depict strategies that can help avoid unwanted influences. Videotape the roleplays.

After the roleplays, ask students to share responses to the sentence, "What I realized was...."

■ Discuss the **Learning from the Past** worksheet from Lesson 2, if you have not yet done so. Have students describe the circumstances people faced when they first used tobacco. Ask students to explain how the situations could have been altered to reduce the temptation to use tobacco.

Evaluation

Have students identify the three most important factors that influence the decision to use or not use tobacco. Students should explain why each is an important influence on this decision.

Follow-Up/ Extension

Have students identify teen hangouts that encourage drug use. Students should suggest ways that they could promote a no-use attitude in these places.

Have students plan a drug-free party. Tell them to explain how the party could be arranged to support decisions not to use tobacco.

STUDENT

Decisions, Decisions

Directions: In the *Decisions* column, describe six decisions that are important to you. Then think about all the influences that will affect your decision. Write these in the *Influences* column.

Decisions	Influences
1. Tobacco use	
2.	
3.	
4.	
5.	
6.	

LESSON 6

SAYING NO

Objective

Students will be able to describe strategies for saying no to tobacco.

Time

One class period.

Overview

In order to make their own decisions about tobacco use, students must be able to resist peer pressure. Students need to understand and practice refusal skills.

In this lesson, students discuss peer pressure. A transparency offers ways to say no to pressure. Groups use refusal skills to write responses to scenarios about tobacco use and present these roleplays to the class.

Instructional Strategies

Class discussion, cooperative learning groups, roleplays.

Teacher Materials and Preparation

HAVE:
✓ Overhead projector.
✓ Transparency marker.

COPY:
✓ **How Will You Respond?** worksheet, one for each student.

MAKE:
✓ Transparency of **Ways to Say No**.

REVIEW:
✓ **Ways to Say No** ***Example***.

Procedure

■ Ask students to think of times when they let someone talk them into doing something they didn't want to do. Ask the following questions:

- How did you feel about what you did?
- Do you have any regrets?
- Since then, have you given any more thought to how you could have avoided that situation?
- What would you do differently, if you could?

Tell students that peer pressure is the power of influence friends have over you to persuade you to behave in a certain way. Explain that this lesson will provide opportunities for students to deal effectively with peer pressure.

■ Ask students for examples of positive effects of peer pressure. Then ask for examples of negative effects of peer pressure. Some activities affected by peer pressure—positive or negative—include risk taking, completing homework assignments, joining school clubs or teams, dating, grooming habits, using particular language, behaving a certain way in class, and others.

Conclude that peer pressure can have positive or negative consequences. If people consider consequences and risks, they can choose to accept or reject encouragement (pressure) from others.

■ Ask students to think about what makes us vulnerable to influence from others. Why is it so hard to resist this pressure? Be sure students consider such factors as insecurity, desire for friendship, etc.

Reassure students that it is normal to take risks. In fact, our society rewards risk taking when the results could be beneficial. Point out that we can reduce risks by careful decision making that considers short- and long-range consequences. Taking risks, however, is childish when you let others control your decisions and thereby give up your right to think for yourself.

■ Show students the **Ways to Say No** transparency. Discuss ways to say no to peer pressure. Use the **Ways to Say No *Example*** to guide this discussion.

Review ways to change circumstances (situation, self-esteem, setting, etc.) to create an environment that supports a decision not to use tobacco.

Tell students it is important to plan for situations where tobacco may be in use. Some of the steps in making a plan include:

- Get details ahead of time (where? why? who? when? what?).
- Consider the short- and long-term consequences.
- Think of alternatives.
- Plan a way to get out of a situation, if necessary.

Emphasize that it is important to have friends who know your feelings about tobacco use and agree to support your plans.

■ Divide the class into small groups, and distribute the **How Will You Respond?** worksheet. Tell students to write responses and suggest changes that would help avoid the situation. Have groups roleplay their responses. *Optional*: Videotape the roleplays.

■ Review ways to say no to peer pressure. Emphasize that it is important to practice each technique. One technique might work in one situation; another technique might be more appropriate for a different situation.

Have students write notes to themselves to keep close at hand. The note should say, "Sometimes you have to be your own best friend—it's OK to say no."

Evaluation

Use the scenarios on the **How Will You Respond?** worksheet or write new ones for students to use. Have students describe in writing a strategy for saying no for each scenario.

Follow-Up/ Extension

For additional practice in strengthening refusal skills, see **It's Your Choice**. This substance abuse prevention skills curriculum includes *Saying No to Tobacco*, a curriculum guide; *Danny's Dilemma*, an interactive student book; and *Tobacco: The Real Story*. (Available from ETR Associates/Network Publications, P.O. Box 1830, Santa Cruz, CA 95091-1830, (800) 321-4407.)

Ways to Say No

1. Say no and say no more.
2. Keep saying no.
3. Give a reason.
4. Make an excuse.
5. Leave the situation.
6. Suggest something else to do.
7. Ignore the problem.
8. Make a joke of it.

Ways to Say No

Examples

1. **Say no and say no more.**
   When someone pressures you, simply say no and turn away.

2. **Keep saying no.**
   If the pressure continues, repeat the word: "No." Don't offer excuses or explanations.

3. **Give a reason.**
   Explain why you choose to refuse.

4. **Make an excuse.**
   "I have an allergy," or "I tried it once and got sick."

5. **Leave the situation.**
   As soon as you feel pressured, leave. Don't wait a minute longer.

6. **Suggest something else to do.**
   "How about shooting a few baskets?" or "I'm on my way to the library."

7. **Ignore the problem.**
   Change the subject or pretend you didn't hear.

8. **Make a joke of it.**
   "If I want to hang around smoke, I'll join the fire department."

STUDENT

How Will You Respond?

Directions: Discuss each of the following scenarios with your group. Decide what you would do in each situation and write your response. Pick one situation to roleplay for the class.

Scenario 1

It's your birthday. Your friends have brought you a cigar as a joke. At first, they joked about having you smoke it. But now they are getting serious. They are really pressuring you to do what they want—which is not what you want. This could ruin the whole party!

• • •

Scenario 2

The captain of your little league team has offered you some chewing tobacco. He's says it will make you a better player and help you relax and grow up. You know it's wrong, but you just made the team and want to fit in.

• • •

Scenario 3

You live in tobacco country. In fact, your family and many friends have jobs that depend on the sale of tobacco. Even though you do not use tobacco, you have been asked to be photographed for an advertisement for a tobacco product. It will be printed in thousands of magazines that are often read by teenagers.

LESSON 7

ADVERTISING PRESSURES

Objectives

Students will be able to analyze advertising strategies used by the tobacco industry.

Students will be able to evaluate advertising messages.

Time

One class period.

Overview

In the United States, advertising has an important influence on consumer buying. There is some concern, however, about the number of tobacco advertisements designed to appeal to youth. Tobacco companies deny that this is their intent. When students are aware of the ways advertisers try to influence them, they are better able to resist advertising pressures.

In this lesson, students identify familiar advertising slogans. They work with partners to roleplay high-pressure salespeople. Stu-

dents also identify selling strategies and analyze tobacco ads from magazines. Discussion of a reading assignment focuses on feelings about advertising practices.

Instructional Strategies

Class discussion, roleplays, worksheets.

Teacher Materials and Preparation

HAVE:
- ✓ Chalk and chalkboard.
- ✓ Overhead projector.

OBTAIN:
- ✓ Five current, familiar advertising slogans.
- ✓ A variety of print advertisements for demonstration of selling slogans.
- ✓ Tobacco advertisements, one for each student. (You may want to assign students to bring in an advertisement as homework prior to this lesson.)

COPY:
- ✓ **Tobacco for Sale** worksheet, one for each student.
- ✓ **The Cadillac of Cigarettes** student page, one for each student.

MAKE:
- ✓ Transparency of **Selling Strategies**.

REVIEW:
- ✓ **Teacher Background Information**.
- ✓ **The Cadillac of Cigarettes**.

Procedure

■ Read some popular advertising slogans to the class. Ask students to identify the product for each slogan. Examples of such slogans include:

- *Things go better with...* (Coke).
- *It's a good time for the great taste of...* (McDonald's).

- *You've come a long way, baby* (Virginia Slims).

Ask students if they were surprised by how many of the slogans they could identify. Explain that in this lesson they will examine advertising tactics, so they can be wise consumers.

■ Give each student a print advertisement. Be sure you have examples of each of the selling strategies presented in the **Teacher Background Information** and on the transparency. You may not be able to find tobacco advertisements that address each of the selling strategies, so use other products as necessary.

Show students the **Selling Strategies** transparency. As each strategy is discussed, have students analyze their print advertisements to see if that strategy is used in their advertisement. (Some advertisements feature more than one strategy.)

Have students with advertisements using that strategy show the advertisement to the rest of the class. Students should explain why they think the advertisement illustrates the strategy under discussion.

Conclude by telling students that advertising is an important influence on our lives. We should always remember that the purpose of *any* advertisement is to convince us to buy a product or service. Collect all the print advertisements so they can be used again.

■ Have students choose partners. One partner will be the seller, and the other will be the buyer. The seller should pretend to have something of great value in one hand. He or she should try to convince the other partner to buy the unknown merchandise. The seller can use any strategies or claims that might convince the partner to buy. After three or four minutes, have partners switch roles.

Discuss the strategies the sellers used. List strategies on the board. Ask students which strategies were most effective. What behaviors or promises were most difficult to resist? How did the sellers feel? How did the buyers feel?

■ Give each student a tobacco advertisement. Tell students to identify the strategy or strategies used in the ads. Which ads provide accurate, useful information about the short- and long-

range consequences of tobacco? Do the ads give good reasons for using the product? Do they make any doubtful claims?

Were any of the advertising gimmicks used in the partners' activity used in the ads? Are any of the ads targeted toward specific groups? (e.g., teens, women or particular cultures) How can you tell? How do you feel about this?

Distribute the **Tobacco for Sale** worksheet. Have students use their ad to complete it.

■ Distribute **The Cadillac of Cigarettes** student page. Tell students to follow along as you read the article aloud. Discuss student feelings about whether the black cigarette would sell. What does this say about the effect of advertising on people? Is there a message for consumers?

Ask students to think about tobacco advertising on TV, in magazines, on billboards near schools and at major sporting events. Should the tobacco industry be allowed to advertise in such places? How can people resist advertising?

Evaluation

Tell students to study some ads in newspapers or magazines to find examples of advertising strategies for tobacco, alcohol or caffeine products (such as coffee, cola or tea). Students should identify the strategies used in the ads. Tell students to write the questions that they would want answered before they decided to use the products.

Have students complete one of these sentences, "I think tobacco advertising is...," or "Advertisers must think that people are...."

Follow-Up/ Extension

Have students work in small groups to create ads that counter the claims made in the tobacco ads they studied.

TEACHER BACKGROUND INFORMATION
Advertising Appeals

A good advertisement captures and holds attention, creates a desire and motivates you to take action.

The following techniques are commonly used to create a need that previously didn't exist:

- ***Glittering generality:*** Uses expressions like *great, the best,* and *the only.* The claims have no substantiation in fact, but because the buyer is bombarded with words that have positive associations, the buyer feels good about the product.
- ***Humor:*** An ad makes people laugh, and when they remember the ad, they think of buying the product.
- ***Statistics:*** Buyers seem to be impressed by statistics, but these ads usually don't explain what study or research was used, who conducted it, and where it was done.
- ***Card stacking:*** Ads give one-sided views of their products. Only the beneficial aspects are mentioned, not the weaknesses.
- ***Fact vs. opinion:*** Statements that are opinions that can't be or haven't been proven seem like facts if the buyer is convinced the speaker knows what he or she is talking about.
- ***Concern for the public good:*** Ads that claim concern about our environment or social ills cause people to support—and purchase—the product.
- ***Bandwagon:*** Suggests that everyone or all the people are doing it or using it. The buyer doesn't want to be left out, or does not want to appear out of it, so he or she buys the product.
- ***Down-home appeal:*** An ad shows an average person recommending the product, so the average buyer identifies with that person and follows her or his example.
- ***Sensory appeal:*** Images or sounds appeal in the ad are appealing to the senses. The buyer imagines tasting or smelling the product and decides to buy it.
- ***Transfer:*** An attractive, sociable, sexy or well-dressed man or woman sells the product. Buyers imagine that when they use the product, they will either meet or become that person.
- ***Testimonial:*** A well-known person claims that he or she uses the product and loves it. In fact, she or he may never even have used it!
- ***Fantasy:*** Unreal features and powers (giants, superhuman strength, athletic prowess) are displayed and become associated with the product.

TEACHER

Selling Strategies

Glittering Generality

Humor

Statistics

Card Stacking

Fact vs. Opinion

Concern for the Public Good

Bandwagon

Down-Home Appeal

Sensory Appeal

Transfer

Testimonial

Fantasy

STUDENT

Tobacco for Sale

Directions: Use an advertisement for a tobacco product to answer the following questions.

1. What's the name of the product?

2. What type of tobacco is being sold?

3. Is there a slogan? If so, what is it?

4. What are the selling strategies used in this ad?

5. Your advertisement may have a "warning." Why do you think the tobacco company put the warning on the advertisement?

6. Who do you think is the audience for your advertisement? How can you tell?

STUDENT

The Cadillac of Cigarettes

by Andy Rooney

The other night I turned in my ticket at a parking garage in midtown New York and waited for them to extricate my car from the pile upstairs.

A man in his mid-30s came over and stood beside me. He had a briefcase with him, and before he spoke to me I could tell he was going to speak to me.

"You're Andy Rooney, aren't you?" he said.

I don't deny that except under extreme circumstances, so I admitted I was, although I was sure I didn't want to hear what he was going to say next.

"Would you like to see an idea I just presented to one of the biggest ad agencies in town?" he asked. I shrugged. I didn't have any interest at all in seeing it, but before I answered he opened his briefcase and unfolded a glossy piece of paper.

"The ultimate cigarette," it said, "for people to whom money is no object."

He had a name for the cigarette, but I forget it.

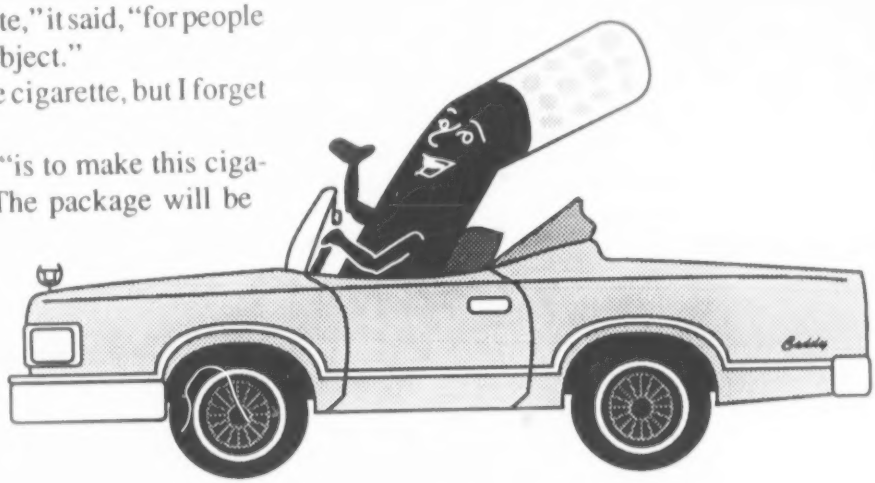
"My idea," he said, "is to make this cigarette a status symbol. The package will be black, and the cigarette itself will be black. That way everyone will know when you pull out this pack of cigarettes that you smoke the most expensive cigarette in the world. It'll give you instant class."

"Did they like this idea?" I asked.

"Have to like it," he said. "How they not gonna like an idea this surefire? Listen. We got Cadillacs and Rolls-Royces for people who want to spend a lot on a car. We got swimming pools for status symbols for a house. We got Countess Mara neckties. We got status symbols for everything except cigarettes."

"How will you make them so expensive?" I asked. "Will the tobacco be better? Could they make a really great cigarette if they wanted to?"

"They won't be any different," he said. "That isn't my business though. I don't know how they'd make them. The big thing is, they'd be really expensive. That's what'll get people to buy them."



Excerpted with permission from Rooney, Andy. 1982. "The Cadillac of Cigarettes." Orlando, FL: Tribune Media Service.

LESSON 8

LIVING WITH YOUR CHOICE

Objective

Students will be able to evaluate reasons for use or nonuse of tobacco.

Time

One class period.

Overview

The U.S. Surgeon General has set a goal of a smoke-free society by the year 2000. Community support for decisions to avoid tobacco use can make an important contribution to this goal.

In this lesson, students discuss reasons why people use or don't use tobacco. They write letters to friends who smoke encouraging them to quit. Then students offer their opinions about tobacco use in continuum voting. Finally, they publicly state their decisions about tobacco use.

Instructional Strategies

Brainstorming, class discussion, continuum voting, creative writing.

Teacher Materials and Preparation

HAVE:

- ✓ Chalkboard and chalk.
- ✓ Overhead projector.
- ✓ Transparency marker.

MAKE:

- ✓ Transparency of **Why People Use Tobacco**.
- ✓ Transparency of **Why People Don't Use Tobacco**.

PREPARE:

- ✓ Post name and addresses of local affiliates of the American Lung Association, American Cancer Society, American Heart Association or local hospitals that offer programs to help people stop using tobacco. (See **Help Someone Quit** teacher page.)

Procedure

■ Tell students that about 350,000 people in the United States die each year from tobacco-related causes. If that number of people stood shoulder to shoulder, arm in arm, the line would be about 132 miles long.

Identify a location that distance from your classroom. How long would it take to drive that distance on the highway without stopping for breaks? (It would take about two and one-half hours.)

Explain that in this lesson, students will look at reasons for using or not using tobacco.

■ Have students brainstorm reasons people use tobacco. List the responses on the board. Display the **Why People Use Tobacco** transparency. Discuss any reasons listed on the transparency that were not identified by students.

Then have students brainstorm reasons people choose not to use tobacco, and list these responses. Display the **Why People Don't**

Use Tobacco transparency. Discuss any reasons listed on the transparency that were not identified by students.

■ Ask students to think of someone who they wish would quit using tobacco. Have students write a letter to this person (or a fictitious person), asking them to quit smoking. Students can refer to the list from the transparency to help identify which reasons for quitting they will use in their letters.

Remind students that decisions about tobacco use are not always easily reversed. Many adult tobacco users decided to use tobacco before the harmful effects of tobacco were known. Once the tobacco addiction was well established, quitting became extremely difficult.

Reassure students that help is available for users who want or need help in breaking their addiction. Identify local programs that help tobacco users quit. Emphasize that tobacco use is not a wise decision.

Post the names and addresses of local voluntary health agencies on the bulletin board. See the **Help Someone Quit** teacher page for ideas.

■ Discuss ways that tobacco users are treated differently than nonusers. Do students feel and act differently toward users? How? What are the main reasons, both personal and environmental, that nonusers give for their resentment of smokers and chewers? Are the reasons justified?

Identify space in the classroom to serve as a continuum. One end will represent *Agree*, and the other end will represent *Disagree*. The continuum should be long enough that all students can stand along it. Tell students to move to a location on the continuum that indicates their feelings about each of the statements you read.

Read the **Continuum Voting Statements**. Allow time after each statement for students to move along the continuum. Ask for student volunteers to explain their responses.

■ When continuum voting is completed, ask students to complete the following sentence: "While voting, I was surprised to see that ...."

Point out that although most people know that tobacco is harmful to their health, issues related to the use of tobacco are not so easily resolved.

■ Have each student stand and state his or her feeling about tobacco use. Students should say whether they plan to use tobacco in the future.

Note: This is a particularly difficult activity for students. It would be for adults, as well. However, a public statement of intentions to adopt or not to adopt a particular behavior is considered a critical step in behavior change. As necessary, allow students to pass on the activity. Ask students who pass to write their pledges down and post them in the classroom.

■ Discuss the importance of supporting the efforts of others—friends, family, society—and the need for laws and rules to protect society. Explain local and state laws regarding tobacco use. Point out that one way to take a stand is by supporting the police in enforcing laws related to tobacco use.

Another way to take a stand is to support agencies that advocate your viewpoint. Students can do volunteer work or promote the programs of local agencies.

Evaluation

Share with students the words of former Surgeon General C. Everett Koop, "Some behaviors aren't worth dying for." Tell students to write a paper that supports Dr. Koop's statement. It should focus on tobacco use behavior.

Follow-Up/ Extension

Prepare and post a declaration on the classroom door proclaiming the class a tobacco-free group. Have students sign the declaration.

Write a class letter to the principal and parent-school club, asking them to declare the campus tobacco free.

Invite representatives from local anti-tobacco groups to talk about their effortsin the community to promote the tobacco-free lifestyle and how students can make a difference in their community.

Why People Use Tobacco

- to reduce stress
- to feel more attractive
- to look older
- to look sophisticated
- out of curiosity
- because their friends do
- for fun
- out of habit or addiction
- because of advertising influences
- because it's a family tradition

Why People Don't Use Tobacco

- tastes bad
- expensive
- smells bad
- offends others
- stains teeth and fingers
- burns holes in clothing
- addictive
- unhealthy
- against religious beliefs
- can kill you

TEACHER

Help Someone Quit

HELP SOMEONE QUIT
Contact your local voluntary health organizations*
American Cancer Society 1-(800) 227-2345
American Heart Association 1-(214) 373-6300
American Lung Association 1-(212) 315-8700
They have help for quitters!

* These are the phone numbers for the national offices. Look in the phone book for local numbers or call the national offices for help in contacting local offices.

TEACHER

Continuum Voting Statements

Directions: Read the following statements to students. Allow time after each statement for students to move to a new point on the continuum and explain their responses.

- People have a right to use tobacco.
- A school campus should be tobacco-free.
- Teachers should be allowed to use tobacco at school during breaks.
- Tobacco users (smokers and chewers) should pay higher rates for health insurance.
- Using tobacco generally makes a person seem more attractive.
- Chewing tobacco and snuff are safer than smoking tobacco.
- Smoking in restaurants should be banned.
- I plan to use tobacco in my future.
- People who use tobacco are looked down on by nonusers.
- Tobacco use is bad for your health.
- Hospitals should sell tobacco products and provide smoking sections on each floor.

REFERENCES

American Lung Association. 1987. Tobacco's toll on America. Booklet no. 0451.

American Lung Association. 1988. Challenges: The impact of respiratory disease on minority populations. Presented during the First National Leadership Forum on Respiratory Health in Minority Populations, June 15-17, Los Angeles, CA.

Centers For Disease Control. 1987. Behavioral risk factor surveillance system (1986) data. *Morbidity and Mortality Weekly Report.*

Education Development Center, Inc. 1989. Integrating smokeless tobacco into Growing Healthy. Draft. Centers for Disease Control.

Glynn, T. J. 1989. Essential elements of school-based smoking prevention programs. *Journal of School Health* 59, no. 5 (May): 181-88.

Lichtenstein, E., Severson, H. H., Friedman, L. S., et. al. 1984. Chewing tobacco use by adolescents: Prevalence and relation to cigarette smoking. *Addictive Behavior* 9:351-55.

Secker-Walker, R. H. et. al. In *Use of smokeless tobacco among children in the United States.* G. Boyd and Associates. Burlington, VT: University of Vermont Office of Health Promotion Research.

U.S. Department of Health and Human Services. 1982. *The health consequences of smoking: Cancer.* A report of the Surgeon General. Washington, DC: U.S. Government Printing Office.

U.S. Department of Health and Human Services. Public Health Service. 1986a. *The health consequences of using smokeless tobacco: A report of the advisory committee to the Surgeon General.* Bethesda, MD: DHHS pub. no. (NIH) 86-2874.

U.S. Department of Health and Human Services. 1986b. Office of Inspector General, Office of Analysis and Inspectors. *Youth use of smokeless tobacco: More than a pinch of trouble.* Washington, DC: National Program Inspection.

U.S. Department of Health and Human Services. Public Health Service. 1988. *The health consequences of smoking: Nicotine addiction.* Rockville, MD: DHHS pub. no. (CDC) 88-8406.

The following organizations have materials on tobacco use that may be appropriate for use in schools:

Action on Smoking and Health (ASH)
2013 H Street N.W.
Washington, DC 20006

The American Cancer Society
777 Third Avenue
New York, NY 10017

American Heart Association
7320 Greenville Avenue
Dallas, TX 75231

The American Lung Association
1740 Broadway
New York, NY 10019

Group Against Smoking Pollution (GASP)
P.O. Box 632
College Park, MD 20740

Office of Smoking and Health
Rockville, MD 20857

The Contemporary Health Series

Into Adolescence : **Grades 5-8**	**Curriculum Unit TITLE #**	**Student Workbook TITLE #**
Learning About AIDS	370	510
Enhancing Self-Esteem	371	511
Living in a Family	372	512
A Time of Change	373	513
Choosing Abstinence	374	514
Learning About Reproduction and Birth	375	515
Avoiding Drugs	376	516
Communicating Emotions	377	517
Becoming a Health-Wise Consumer	378	518
Making and Keeping Friends	380	520
Living Without Tobacco	381	521

All Curriculum Units are $19.95 each.
Student Workbooks are $2.95 each (quantities of 10 or more are $2.80 each.)

For more information or to order, contact:

Sales Department
ETR Associates/Network Publications
P.O. Box 1830
Santa Cruz, CA 95061-1830

or call Toll-Free 1(800) 321-4407
FAX (408) 438-4284

Supplementary Classroom Pamphlets
Recommended for use with the *Contemporary Health Series*

Into Adolescence - Grades 5-8

Curriculum Unit	Recommended Pamphlets:
# 370 Learning About AIDS	# 174 The ABC's of AIDS # 161 Teens & AIDS: Why Risk It?
# 371 Enhancing Self-Esteem	# 122 Feeling Great!
# 373 A Time of Change	# 181 Menstruation Facts* # 182 Puberty Facts* # 188 Male Facts* # 193 Female Facts*
# 374 Choosing Abstinence	# 138 Deciding About Sex: The Choice to Abstain # 097 Sex? Let's Wait!
# 375 Learning About Reproduction and Birth	# 188 Male Facts* # 193 Female Facts*
# 376 Avoiding Drugs	# 189 Drug Facts*
#381 Living Without Tobacco	# 083 About Tobacco # 098 Cigarettes! # 095 Smokeless Tobacco!

All pamphlets marked with an asterisk* are priced as follows:
50 for $17.50; 200 for $60.00; 500 for $125.50; 1000 for $220.00.

All other pamphlets are: 50 for $15.00; 200 for $52.00; 500 for $110.00; 1000 for $190.00.

For more information or to order, contact:

Sales Department
ETR Associates/Network Publications
P.O. Box 1830
Santa Cruz, CA 95061-1830.

Call Toll-Free 1 (800) 321-4407
or FAX (408) 438-4284.

The Contemporary Health Series

Entering Adulthood **: Grades 9-12**	**Curriculum Unit TITLE#**	**Student Workbook TITLE #**
Living in Relationships	385	525
Understanding Reproduction, Birth and Contraception	386	526
Connecting Health, Communication and Self-Esteem	387	527
Preventing Sexually Related Disease	388	528
Coping with Sexual Pressures	389	529
Examining Drugs and Risks	390	530
Understanding Depression and Suicide	391	531
Balancing Stress for Success	392	532
Planning Life Directions	393	533
Developing Responsibility and Self-Discipline	394	534

All Curriculum Units are $19.95 each.
Student Workbooks are $2.95 each (quantities of 10 or more are $2.80 each.)

For more information or to order, contact:

Sales Department
ETR Associates/Network Publications
P.O. Box 1830
Santa Cruz, CA 95061-1830

or call Toll-Free 1(800) 321-4407
FAX (408) 438-4284

Supplementary Classroom Pamphlets
Recommended for use with the *Contemporary Health Series*

Entering Adulthood - Grades 9-12

Curriculum Unit	Recommended Pamphlets:
# 386 Understanding Reproduction, Birth and Contraception	# 137 Birth Control Facts* # 101 Am I Parent Material? # 105 Talking with Your Parents About Birth Control
# 387 Connecting Health, Communication and Self-Esteem	# 156 Teen Success! # 123 Teen Esteem!
# 388 Preventing Sexually Related Disease	# 153 STD Facts* # 111 What Do We Know About AIDS? # 171 AIDS: Am I at Risk? # 161 Teens & AIDS # 173 Condoms & STD # 139 The Condom
# 389 Coping with Sexual Pressures	# 138 Deciding About Sex: The Choice to Abstain # 097 Sex? Let's Wait!
# 390 Examining Drugs and Risks	# 189 Drug Facts*
# 391 Understanding Depression and Suicide	# 155 Teen Stress!
# 392 Balancing Stress for Success	# 123 Teen Esteem! # 155 Teen Stress! # 156 Teen Success!

All pamphlets marked with an asterisk* are priced as follows:
50 for $17.50; 200 for $60.00; 500 for $125.50; 1000 for $220.00.

All other pamphlets are: 50 for $15.00; 200 for $52.00; 500 for $110.00; 1000 for $190.00.

For more information or to order, contact:

Sales Department
ETR Associates/Network Publications
P.O. Box 1830
Santa Cruz, CA 95061-1830.

Call Toll-Free 1 (800) 321-4407
or FAX (408) 438-4284.

About the Author

Judith K. Scheer, EdS, CHES, has been a health teacher at the elementary and high school levels and a university professor and supervisor of student teachers. She has been a teacher, curriculum writer and trainer for Growing Healthy, as well as a Quest trainer in the Skills for Living program.

Ms. Scheer is the author of *You and Me Tobacco Free* and *Germ Smart*, also published by ETR Associates/ Network Publications. She has served as a consultant to a variety of organizations, including the California State Department of Education and the Contra Costa County Office of Education.

Reviewers of
Into Adolescence: Living Without Tobacco

Carol I. Bratton, MA
Teacher
Walters Junior High School
Fremont, CA

David Macrina, PhD
Associate Professor
School of Education
University of Alabama, Birmingham
Birmingham, AL

Warren McNab, PhD
Professor of Health Education
University of Nevada at Las Vegas
Las Vegas, NV

Sue Myers, MEd
Superintendent
Pine Strawberry School District
Pine, AZ

Fay Catlett Sady, MPH
Tobacco Youth Prevention Coordinator
County Office of Education
Santa Cruz, CA

Janet L. Sola, PhD
Director—Program Services Division
YWCA of the U.S.A.
New York, NY

ABOUT THE BOOK: *Into Adolescence: Living Without Tobacco* sends a clear "no use" message to students in grades 5-8 through 10 engaging and informative lessons. Beginning with an overview of the structure and function of the healthy respiratory system, students learn about the harmful effects of tobacco in all its common forms. The module builds on the facts about tobacco use with hands-on activities that enhance adolescent decision-making and communication skills. This easy-to-use curriculum includes all materials and each lesson is designed to give teachers the flexibility to choose, modify and combine the appropriate content for students.

Into Adolescence: Living Without Tobacco

- integrates into any comprehensive health education program
- provides extensive background information on the harmful effects of tobacco, including cigarettes, pipes, cigars, snuff and chew
- helps students develop effective personal strategies for resisting both media and peer pressure to use tobacco products
- uses a variety of instructional strategies and activities to maintain student interest and motivate healthy lifestyles

ABOUT THE SERIES: The Contemporary Health Series covers critical health and family life topics in a sequence of modules with two curricular divisions: INTO ADOLESCENCE for middle school teachers and ENTERING ADULTHOOD for high school teachers. Each of the modules in a division is compatible with the others but may stand alone. Other INTO ADOLESCENCE titles include: *Avoiding Drugs, Communicating Emotions, Learning About AIDS, Living in a Family, Choosing Abstinence, A Time of Change, Learning About Reproduction and Birth,* and *Enhancing Self-Esteem.* Student workbooks, which include all the student activity sheets, are also available to supplement each unit.

Network Publications, a division of ETR Associates
Santa Cruz, CA

ISBN: 1-56071-027-6

END

U.S. Dept. of Education

Office of Education
Research and
Improvement (OERI)

ERIC

Date Filmed

March 29, 1991